

U. S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

Social Security Administration

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Child Welfare Services: Report of the Advisory Council  
Public Assistance: Report of the Advisory Council  
State Public Assistance Legislation, 1959

1935



*Twenty-fifth Anniversary of the Social Security Act*



1960

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# Social Security in Review

**T**HE number of persons receiving aid under the five public assistance programs rose in November for the fourth consecutive month. The total of 6.9 million was 49,000 or 0.7 percent more than that in October. Most of the increase was centered in general assistance, where the number of cases rose 10,000 (2.4 percent) and the number of persons, 42,000 (3.7 percent). The effects of the steel strike on the caseload, less than in October and the 2 preceding months, were augmented by seasonal influences and apparently by flood conditions in the State of Washington. For that State the number of persons receiving general assistance rose 7,000 or 39.5 percent in November.

The number of recipients of aid to dependent children rose slightly for the third consecutive month, with 42 States reporting increases. More than half the national increase of 8,300, or 0.3 percent, occurred in Pennsylvania and Puerto Rico. In Pennsylvania, with a third of the steel strikers, the number of persons receiving aid to dependent children rose 15,400 from July through November. The national old-age assistance caseload decreased 3,200 or 0.1 percent in November, and that in aid to the blind remained virtually the same as in October. Aid to the permanently and totally disabled showed an increase of 1,300 or 0.4 percent.

Total expenditures for assistance, including vendor payments for medical care, increased slightly to \$308.3 million. The change in total payments for each of the special types of public assistance was also relatively small—0.3 percent or less. The largest change — a decrease of

\$495,000—occurred in old-age assistance. For general assistance, total payments, excluding vendor payments for medical care, rose \$159,000 or 0.6 percent.

The average payment per recipient in the country as a whole decreased by 46 cents in aid to the permanently and totally disabled and by much smaller amounts in old-age assistance, aid to the blind, and aid to dependent children. For general assistance the average payment per case dropped \$1.25. Increases or decreases in vendor payments for medical care accounted for most of the appreciable changes in the special

types of public assistance, although some noticeable changes resulted from the initiation of new policies or procedures. South Carolina raised the maximums on monthly money payments \$2 in old-age assistance and aid to the blind, \$22 in aid to the permanently and totally disabled, and \$10 in general assistance. Average payments went up, however, only in aid to the permanently and totally disabled and general assistance because of the offsetting influence of decreases in vendor payments for hospitalization.

When West Virginia began basing assistance payments to recipients of

	November 1959	October 1959	November 1958
<b>Old-age, survivors, and disability insurance:</b>			
Monthly benefits in current-payment status:			
Number (in thousands)	13,644	13,576	12,430
Amount (in millions)	\$840.5	\$835.3	\$697.5
Average old-age benefit (retired worker)	\$72.71	\$72.64	\$66.35
Average old-age benefit awarded in month	\$81.64	\$82.04	\$76.00
<b>Public assistance:</b>			
Recipients (in thousands):			
Old-age assistance	2,398	2,401	2,454
Aid to dependent children (total)	2,926	2,918	2,811
Aid to the blind	109	109	110
Aid to the permanently and totally disabled	348	347	325
General assistance (cases)	412	403	393
Average payments:			
Old-age assistance	\$65.51	\$65.63	\$63.18
Aid to dependent children (per recipient)	28.70	28.71	28.01
Aid to the blind	68.97	69.05	67.82
Aid to the permanently and totally disabled	63.66	64.12	61.66
General assistance (per case)	69.70	70.95	63.88
<b>Unemployment insurance (State programs):</b>			
Initial claims (in thousands)	1,501	1,197	1,246
Beneficiaries, weekly average (in thousands)	1,285	1,050	1,454
Benefits paid (in millions)	\$168.3	\$136.9	\$170.6
Average weekly payment for total unemployment	\$32.21	\$30.81	( <sup>1</sup> )

<sup>1</sup> Comparable data not available.

the special types of public assistance on 85 percent of their budget deficits (instead of 75 percent), the average payment per recipient rose roughly \$1.50-\$3.60. In North Carolina the effect of a recent reduction from 80 percent of need met to 75 percent was responsible for a decrease of \$2.26 in the average payment under the program of aid to the permanently and totally disabled.

● Persons receiving monthly benefits under the old-age, survivors, and disability insurance program numbered 13.6 million at the end of November—68,000 more than in October. More than half—7.5 million—were retired workers receiving old-age benefits. About 2.4 million were aged wives, dependent aged husbands, young wives with child beneficiaries in their care, and children of old-age beneficiaries. Almost one-fourth were

the survivors of deceased workers—1.9 million widowed mothers and children and 1.4 million aged widows and dependent aged widowers or parents. About 328,000 disabled workers aged 50-64 were receiving disability insurance benefits, and dependent's monthly benefits were going to about 121,000 wives, husbands, and children of disabled-worker beneficiaries.

Monthly benefits were being paid at the end of November at a monthly rate of \$840.5 million, of which \$634.6 million went to retired workers and their families. Survivor benefits amounted to \$172.7 million; \$92.5 million was being paid to widowed mothers and children and \$80.3 million to aged widows, widowers, and parents. Benefits to disabled workers aged 50-64 totaled \$29.1 million, and those to dependents of disabled-worker beneficiaries amounted to \$4.0 million.

The average old-age monthly benefit increased to \$72.71 in November. Since January 1959, the first month for which the higher benefits provided by the 1958 amendments to the Social Security Act were payable, the average has gone up each month; the total increase for the 11 months was \$1.31. The average benefit payable to disabled workers aged 50-64 rose to \$88.93 in November, \$1.04 more than the average amount payable for January 1959.

Monthly benefits were awarded to almost 165,000 persons in November, about 24,000 fewer than in October but 3,000 more than the number in November 1958. Awards of lump-sum death payments totaled \$12.1 million. These lump-sum payments were based on the earnings records of 57,200 deceased workers; the average payment per worker of \$210.87 was a new high.

	November 1959	October 1959	November 1958	Calendar year 1958 1957	
Civilian labor force, <sup>1,2</sup> total (in thousands) .....	69,310	70,103	68,485	68,647	67,946
Employed .....	65,640	66,831	64,653	63,966	65,011
Unemployed .....	3,670	3,272	3,833	4,681	2,936
Personal income (in billions, total seasonally adjusted at annual rates) <sup>1,3</sup> .....	\$384.8	\$382.3	\$367.5	\$359.0	\$350.6
Wage and salary disbursements .....	260.2	259.2	246.1	239.4	238.5
Proprietors' income .....	45.6	45.2	47.2	46.6	44.5
Personal interest income, dividends, and rental income .....	49.3	48.9	45.4	44.7	43.4
Social insurance and related payments .....	22.5	21.8	21.0	20.4	16.2
Public assistance .....	3.2	3.2	3.1	3.0	2.8
Other .....	12.5	12.5	11.9	12.0	11.8
Less: Personal contributions for social insurance .....	8.4	8.4	7.1	7.0	6.7
Consumer price index, <sup>1,4</sup> all items (1947-49 = 100) .....	125.6	125.5	123.9	123.5	120.2
Food .....	117.9	118.4	119.4	120.2	115.4
Medical care .....	153.0	152.5	147.0	144.4	138.0

<sup>1</sup> Data relate to continental United States, except that personal income includes pay of Federal personnel stationed abroad.

<sup>2</sup> Bureau of the Census and Bureau of Labor Statistics.

<sup>3</sup> Data from the Office of Business Economics, Department of

Commerce. Components differ from those published by the Department, since they have been regrouped; for definitions, see the *Annual Statistical Supplement*, 1958, page 1, table 1.

<sup>4</sup> Bureau of Labor Statistics.



# *Child Welfare Services:*

## *Report of the Advisory Council\**

Two advisory councils, one on public assistance and one on child welfare services, were appointed by the Secretary of Health, Education, and Welfare under the terms of the 1958 amendments to the Social Security Act. Both councils submitted their reports to the Secretary and to Congress at the end of 1959. Findings and recommendations from the two reports are presented verbatim in the following pages.

The Advisory Council on Child Welfare Services had been directed to make recommendations and advise on implementing the child welfare provisions in the 1958 legislation. Its recommendations follow immediately; supplementary statements made by two members are omitted here for reasons of space. The recommendations of the Advisory Council on Public Assistance appear on pages 10-22.

### Recommendations

#### 1. A New Definition of Child Welfare Services

Since the passage of the Social Security Act in 1935, Federal participation in child welfare services "for the protection and care of homeless, dependent and neglected children, and children in danger of becoming delinquent" has been authorized by law. The Social Security Act also authorizes use of Federal funds for the return of runaway children who have not attained the age of 18 (originally added in 1950 and amended in 1958). The Council finds the present definition of child welfare services under the law inadequate.

After considering various definitions, the Advisory Council on Child Welfare Services recommends the following definition as most nearly meeting present and future needs:

*Child welfare services are those social services that supplement, or substitute for, parental care and supervision for the purpose of: protecting and promoting the welfare of children and youth; preventing neglect, abuse and exploitation; helping overcome problems that result in dependency, neglect or delinquency; and,*

*when needed, providing adequate care for children and youth away from their own homes, such care to be given in foster family homes, adoptive homes, child-caring institutions or other facilities.*

This definition avoids labeling or categorizing children. It is frequently difficult to classify children as neglected, dependent, in danger of becoming delinquent, etc. Often only a thin line exists between neglect and delinquency. The definition also recognizes the need of every child for parental care, protection, and supervision and emphasizes the need for services to achieve this for children. It provides greater latitude for inclusion of services dealing with any social problem affecting the well-being of children and eliminates the possibility of a narrow interpretation of the scope of services. In addition, it gives greater emphasis than the present definition to services for older children.

The care of children outside their own homes is not limited by this definition to the types of facility listed—these are included only to show some of the ways children can be cared for away from home.

The Council believes that the broad definition in this recommendation encourages State leadership to use all available social service resources for child welfare. The recommended

definition has the added merit that it is specific enough to be readily understandable and administratively sound.

By adding to the definition "helping overcome problems that result in . . . delinquency," the Council recognizes that programs of many State public welfare agencies do include responsibility, not just for prevention of delinquency, but for treatment and control of delinquent children as well.

#### 2. Federal Participation in Total Cost of Child Welfare Services

Federal grants for public child welfare services under Title V, part 3, of the Social Security Act up to the present time have been used to assist in "establishing, extending and strengthening" these services in the States. The primary emphasis, therefore, has been on stimulating effort rather than on paying part of the total cost of the State's child welfare program. "Establishing, extending and strengthening" inevitably implies some elements of support since the two concepts cannot be completely divorced. Federal funds, therefore, are granted so that States and their subdivisions can do more than they otherwise could. The Council believes that this system of Federal-State cooperation should now be extended and recommends that:

*The Federal Government pay part of the total cost of public child welfare services of each State and other cooperating jurisdictions through Federal grants-in-aid on a variable matching basis, with provision for an open-end appropriation, and with continuing encouragement to establishing, extending and strengthening of such services.*

The statutory provision for an open-end appropriation should be formulated in such a way as to assure that there would be no decrease of a particular State's expenditure of

\* Report of the Advisory Council on Child Welfare Services, December 28, 1959.

*State or local money for child welfare services as determined by the fiscal year 1960 or some other base year.*<sup>1</sup>

The Council recommends early consideration by the Congress of this legislation because this legislation would:

a. Enable the States to develop, expand and improve services to meet social problems of children and families, strengthen family life and work toward the stability of the family and the community.

b. Recognize child welfare services as essential and basic with the Federal Government and the States carrying joint responsibility for financing.

c. Give greater encouragement to the States to develop a comprehensive child welfare program involving total community resources, public and voluntary.

d. Provide a basis for over-all program standards.

e. Encourage equalization of services to children within and between States and increase in State and local appropriations.

f. Encourage broad social welfare services for families and children making possible better planning for individual children, according to the needs of each.

g. Help bear the heavy costs of care of children outside their own homes.

h. Enable States as rapidly as possible to provide all necessary child welfare services and to expand these services to keep pace with the swelling child population, the complexity and tensions of today's living, the mobility of our population, the rise in juvenile problems.

Since the Congress of the United States has gained broad experience through its leadership in the setting of national standards in income maintenance and service programs for the aged, the blind, the disabled, and dependent children, the Council believes it is timely for the Congress to provide still further leadership in the field of expanding child welfare

services. In many States where there is disproportionate representation in legislative bodies between urban and rural areas, Congressional recognition of the unmet needs in the total child welfare program will stir State action for the tremendous job still to be done. And because the States are unequal in their ability to finance essential services, a Federal program of aid will bring needed help to more children.

Expenditure reports show that Federal funds for child welfare have helped to stimulate greater State and local financial effort. Legislation providing for payment by the Federal Government of part of the total cost of the child welfare program in the States should be accompanied by assurance that Federal funds would not be substituted for State and local funds. States, thus, would continue to spend at least as much as heretofore, or preferably, State and local funds would increase along with increase in Federal funds.

This might be accomplished through a formula similar to that enacted in the 1954 amendments to the Vocational Rehabilitation Act or by limitation such as that enacted in Title III of the National Defense Education Act of 1958 providing additional funds for vocational education. Furthermore, the fair share of the Federal Government's contribution to the total cost of child welfare services could be reached over a period of years, preferably no longer than five years by a series of planned periodical increases in the percentage of the Federal contribution. Such might be accomplished by any procedure similar to that used in connection with the Vocational Rehabilitation legislation under which a base allotment, or "floor," was established for a five-year period. In order to receive the minimum allotment of Federal funds for each year from 1955 through 1959, State funds for vocational rehabilitation must have equaled those expended in 1954 when the amendments were enacted. In this way, the Federal contribution for child welfare services, which is now about 7 percent, might be increased after five years to 50 percent of the total expended by the States.

Would an open-end appropriation

adversely affect the work of voluntary agencies or perhaps even cut the contributions upon which they depend? The Council believes that the answer is "no." In fact, in some States with high budgets, even more money might be raised for the support of voluntary agencies. For example, in foster care, more adequate funds to buy care from voluntary agencies for individual children would help these agencies improve their services. As a result, voluntary groups, with additional support from private funds, might move into developing other services — such as homemaker or day care. The net result would be to enrich the whole child welfare program.

The Council believes that public and voluntary agencies should join ranks to make use of all available resources to improve services to children. It also endorses the principle of purchase of service by the public agency from qualified voluntary agencies wherever needed. Such services should be purchased on a case-by-case, cost-of-care arrangement.

In 1935 when the Social Security Act was passed, some States had programs to care for dependent children outside the family group, but no special provision was made for them through Federal grants. As a consequence, the present law in effect discriminates against this huge group of children. Today, because of the mounting costs of maintaining these youngsters away from home, they deserve top consideration by the Congress.

### 3. Conditions of Plan Approval

Under present provisions of the Social Security Act for child welfare services, when Federal funds are granted to a State for child welfare services, the State is required to submit a plan for the use of such funds. The provisions for approval of such State plans as provided in the law, consist mainly of a requirement for joint planning between the State agency and the Secretary of Health, Education, and Welfare. This requirement has allowed flexibility in determining the plan for Federal participation in child welfare programs. It has served a very useful

<sup>1</sup> One member of the Council filed a dissent in connection with this recommendation, and one filed an explanatory statement.

purpose because of the wide variation among States in the scope and methods used in developing their programs.

The Council believes, however, that Federal legislation under Recommendation 2 should include more specific requirements for approval of State child welfare services plans and recommends that such plans:

(a) be developed jointly by the State agency and the Secretary of Health, Education, and Welfare; (b) provide for the administration by the State public welfare agency or the supervision of the administration of the plan by the State public welfare agency; (c) provide for such methods of administration, including maintenance of personnel standards on a merit basis, as are necessary for the proper and efficient operation of the plan; (d) provide that the State public welfare agency will make such reports in such form and containing such information as the Secretary may from time to time require and comply with such provisions as he may find necessary to assure the correctness and verification of such reports; (e) provide for progress in coverage and in moving towards a comprehensive child welfare program; and (f) provide for consultation with other public and voluntary agencies and citizens.

In some grant-in-aid programs, such as in public assistance, the State plan must show that the program is in effect in all political subdivisions of the State. Such a plan requirement for child welfare programs is not feasible at the present time, because of the variation in development and scope of child welfare services in the States and the dearth of qualified personnel to provide statewide coverage. The State plan, however, should assure progress toward statewide coverage and a comprehensive program of social services for children and youth.

Many State agencies use advisory committees or other types of consultation in coordinating and planning State child welfare programs. These furnish a means for communication with and for participation of agencies, groups, and individuals in plan-

ning State and local programs. They also help to avoid gaps or duplications in services. States vary a great deal in the use of other public and voluntary agencies and citizen groups in developing child welfare programs. The Council believes that the law should provide for such consultation although it recognizes, of course, that final decisions about the public child welfare programs and the use of Federal grant-in-aid funds must rest with the official body that is charged with the administration of this program and is accountable for the expenditure of State and local funds.

#### **4. Grants for Demonstration and Research Projects in Child Welfare**

In other programs (e.g., vocational rehabilitation, mental health) special projects that discover and develop new or improved methods and facilities or evaluate present methods and facilities, have proven to be sound and effective ways of stimulating and encouraging better services. The grants under these present laws are available to both agencies and institutions of higher learning. Payments are made on the basis of an approved project, without an apportionment of funds on the basis of a formula. In addition to review by the administering agency, these laws usually provide for review and recommendation by specialists competent to evaluate specific projects or by an advisory group chosen for this purpose. The Council recommends that:

*Federal legislation provide for grants to research organizations, institutions of higher learning, public and voluntary social agencies for demonstration and research projects in child welfare.*

The Council believes that this legislative provision will give specific encouragement and incentive to experimentation and research directed towards new or improved methods for child welfare programs as a whole. It will stimulate use of resources of both public and voluntary agencies, as well as those of institutions of higher learning and research organizations. It will encourage test-

ing new ideas and evaluate effectiveness of present methods. It will make it possible to vary the amounts of grants in relation to the size and potentialities of the particular project, thereby, making possible the financing of a larger scale project if it holds sufficient promise.

In administering such a program, the Children's Bureau should seek the judgment of technical experts. This expert judgment, combined with the discretionary powers of the Children's Bureau, would provide reasonable safeguards in granting Federal funds for such projects and also would help in developing criteria and guidelines for selecting individual projects. Among the guidelines considered could be: regional and national significance of the proposed project; demonstration of a new method or service in the child welfare field.

#### **5. Grants for Training of Personnel in Child Welfare**

The personnel shortage in child welfare programs is acute and will become more so. The expansion of these programs through training grants to enlarge the number of trained personnel would greatly benefit the child welfare field as a whole and contribute to improved programs, both public and voluntary. It is estimated that at the present time 3,000 additional public child welfare employees in positions requiring professional training are needed to provide minimum geographical coverage for the entire nation. By 1970, 4,300 more will be required. The current turnover in public child welfare personnel is annually about one fourth of the total employed. These facts make it vital to increase the number of trained professional workers.

The Council therefore recommends that:

*Federal legislation provide grants for training of personnel (a) to State departments of public welfare which may be used for scholarships to individuals; (b) to accredited schools of social work which may be used for scholarships to individuals and for expanding and improving training*



resources for the child welfare field and (c) to public and voluntary social agencies to conduct training projects in child welfare of regional or national significance.

The Council believes that expansion of educational facilities is essential to guarantee a constant stream of professionally trained personnel entering the child welfare field. In the academic year of 1958, only 1,744 students were graduated from accredited schools of social work in the United States. These schools are the source for professional personnel in the entire field of social work. The provision recommended by the Council would encourage more people to enter the child welfare field, especially those with special interest and capacity for work with children — people who might otherwise go into other fields where more opportunities for training already exist. Training opportunities for houseparents, volunteers, and others in positions not requiring professional training also should be broadened. These latter opportunities would stimulate and encourage improved services to children, particularly in group-care facilities where practice has frequently not kept pace with current thinking and research findings on child care.

#### **6. Advisory Council on Child Welfare Services**

The Council recognizes as basic the interpretation of the needs of children by interested citizens to the general public so that immediate and long-range goals may be better understood. The need for articulate support of the Children's Bureau by a group at the national level was recognized by the Council in connection with nearly every proposal under discussion.

Therefore the Council recommends:

*Federal legislation to provide for the creation of an Advisory Council on Child Welfare Services to the Children's Bureau, with its structure, function and membership authorized by the Congress; the Council to study and report to the Secretary on philosophy, broad policies and program*

*concerning social services to children and youth, and to interpret to the public the social welfare needs of children; the members of the Council to be appointed for overlapping fixed terms by the Secretary and to be representative of public, voluntary, civic, religious and professional welfare organizations and groups or other persons with special knowledge, experience or qualifications with respect to child welfare services and the public; the members of the Council to be appropriately compensated for travel and per diem in lieu of subsistence while serving away from their places of residence; and with at least two meetings of the full Council to be called each year.*

Since such a Council would not be involved in administrative responsibilities, it could help the Children's Bureau in a variety of ways. But its primary function would be leadership in the development of citizen interest and understanding of the changing needs and problems in child welfare services. In order to fulfill its functions adequately, the Council should be responsible to the Secretary, working in close cooperation with the Commissioner of Social Security and the Chief of the Children's Bureau.

#### **7. Provision of Means to Examine Basic Causes of Family Disruption**

We know much through research and experience that, if carried out, would protect and strengthen child and family life in the United States. But the Council believes that every effort should be made to extend our understanding of the basic causes which contribute to problems of children and families—for example, desertion, divorce, neglect, alcoholism, unemployment.

Therefore, the Council recommends:

*(a) That the Secretary of Health, Education, and Welfare through the Children's Bureau be charged to examine and look into the basic causes underlying those phenomena which result in problems to children and families, and (b) that Congress provide the necessary funds.*

### **The 1958 Amendments**

So far in this report, the Council has made recommendations for new and extensive Federal legislation for grants-in-aid for child welfare services. Since it was charged by Congress specifically with making recommendations and advising in connection with "the effectuation of the provisions of part 3 of Title 5 of the Social Security Act, as amended by the Social Security Amendments of 1958," the Council is also submitting specific recommendations relating to the 1958 amendments. The Council believes these recommendations should be considered by the Congress if the broader and more extensive recommendations made earlier in this report cannot be immediately put into effect.

#### **8. Continuation of Use of Federal Funds in Urban Areas**

One of the 1958 amendments makes possible the use of Federal funds for child welfare services in urban areas on the same basis as in rural areas.

Prior to this amendment, these funds could be used only to pay for part of the cost of district, county, or other local child welfare services "in predominantly rural areas" and for "developing State services for the encouragement and assistance of adequate methods of community child welfare organization in predominantly rural areas and in other areas of special need."

*The Council recommends no change in the present law on this point.*

#### **9. Change in Formula for Apportionment of Federal Funds for Child Welfare Services**

The 1958 amendments make two changes in the formula for apportioning Federal child welfare services funds. First, the uniform grant is increased from \$40,000 to \$60,000. The amount each year bears the same relationship to \$60,000 that the total appropriation bears to the full amount authorized to be appropri-



ated. For the current year, the amount appropriated is \$13 million and the full amount authorized to be appropriated is \$17 million. Thus, the uniform grant is \$45,882, or  $\frac{13}{17}$  of \$60,000.

The second change is to provide for apportioning the remainder through a combination of two factors: total child population and per capita income. Previously, the remainder was apportioned solely on the basis of the child population under the age of 18 in each State who were living in rural areas. Now, briefly, this amount is apportioned in direct ratio to the total child population under 21 in each State, and in inverse ratio to the per capita income of the State.

In order to assure that States will not have to reduce services in rural areas because of the change in the formula, the amendments also provide a base allotment for each State. This base allotment is the amount the State would receive for a particular year with an appropriation of \$12 million, which is the appropriation that had been made when the amendments were enacted, and the formula in effect prior to these amendments.

Accordingly, the formula recognizes the extension of Federal funds for services to children in urban areas on the same basis as to children in rural areas. At the same time, it also recognizes the importance of continuing services in rural areas initiated under the previous law. Problems have arisen because appropriations have not been increased sufficiently to enable States to benefit by the changes in the formula rather than because of the formula itself.

*The Council recommends that no change be made in the apportionment formula as applied to the existing law.*

## 10. Increase in Authorization

Another amendment increased the amount authorized for the annual appropriation for child welfare services from \$12,000,000 to \$17,000,000. The amount actually appropriated for the fiscal year 1959 was \$12,000,000 and for fiscal 1960, \$13,000,000. Thirty-six States received for 1960

only the base allotment as defined by the amendment. The remaining States received increases above the base allotment but these additional funds probably will be absorbed by the increase in child population and higher costs of services and care. The level of services for these States thus will be approximately the same as for 1959. But in the 36 States that received the base allotment in 1960, the 1959 level of services cannot be maintained.

While the 1958 increase in the authorization was a forward step, the Council believes that a further increment is needed immediately to enable the States to make more adequate provisions for child welfare services. Additional funds should be authorized and appropriated not only to expand services in urban areas but also to enlarge training programs to relieve present problems in recruiting and retaining qualified personnel. The States also report the need:

a. To develop special facilities for the care of children, such as foster family homes, group care for emotionally disturbed children, and day-care centers.

b. To expand services, including adoption, homemaker, protective and preventive services.

c. To conduct research to benefit child welfare programs.

Federal appropriations would have to increase greatly to expand services in urban areas and even to maintain programs in rural areas at the same level. It is known that one State, because of higher salaries, has had to cut out its program to unmarried mothers and its special study of children being placed for adoption and to trim its training program by half.

*The Council recommends that the authorization and appropriation for child welfare services be raised substantially, pending passage of legislation for Federal participation in the total cost of public child welfare services. Testimony before the Congress has established the need for an immediate authorization and appropriation of \$25,000,000 as a first step.*

## 11. Federal Share Requirement

This amendment provides for variable matching of Federal funds for

child welfare services by State and local funds, through defining the State percentage and the "Federal Share" (or the Federal percentage) of the total sum expended under the State plan.

This amendment became effective on July 1, 1959. Consequently, its effect upon programs is largely unknown. Even so, evaluation of this brief experience points up some problems in the application of the amendment within the context of other provisions of title V, part 3, of the Social Security Act.

The "Federal Share" concept contemplates a "total" of Federal and State funds for welfare services. However, the maximum amount of the Federal funds for each State under the closed-end appropriation is fixed by the total appropriation. Hence, most States expend more than is required of them as a State share. The amount of Federal funds appropriated for 1960 was \$13 million. The total estimated expenditures by States and local public welfare agencies for child welfare services in fiscal year 1959 was \$183.7 million, 93.5 percent of which was from State and local funds.

The provision for "establishing, extending and strengthening" child welfare services included in the present law places primary emphasis on stimulation rather than support of child welfare programs and is inconsistent with the "Federal Share" concept. Therefore, if legislation is not immediately passed to enable the Federal government to pay part of the total cost of public child welfare services:

*The Council recommends that the Congress and the Secretary examine this amendment to determine legislative changes needed to provide matching requirements more appropriate to the purposes of title V, part 3 of the Act.*

## 12. Reallotment Provision

This amendment provides for the reallotment of funds not certified as required by some States to other States that have need for and ability to use these funds. It specifies that such funds are to be distributed to

the States after taking into consideration the same factors as are used in apportioning the annual appropriation.

The experience in reallocation of funds in the fiscal year 1959 indicates the desirability of a provision for reallocation of funds. Fifteen States received additional funds from \$208,350 released for reallocation by four States. This sum which would not have been used in prior years, was used for meeting special program needs in the States. The reallocation of funds in 1959 appears to have stimulated all the States to more active and effective program planning not only for the year but on a long-range basis.

Since funds are reallocated by the fixed formula, a problem has arisen. It appears that the amount which will be available for reallocation in the fiscal year 1960 will be nominal, if any funds at all are available. Almost half the States have indicated they will request additional funds. This will mean the distribution of the funds by the fixed formula will result in amounts so small as to be of little use to States.

The Council believes that the reallocation provision has accomplished its objective of full utilization of Federal child welfare funds for the purpose for which they were appropriated. The Council also recognizes that division of funds in small amounts achieves no substantial gains in the individual States receiving them.

*The Council recommends continuation of a provision for reallocation of funds certified by States as not required for carrying out their State plans. It recommends, however, that provision be made for administrative discretion in the reallocation of these funds.*

### **13. Provision for Return of Runaway Children**

This amendment makes a minor modification in the provision, first included in the Act in 1950, for paying the cost of the return of runaway children to their home community in another State. The primary changes were: upper limit in age of children

was raised from 16 to 18; and the maintenance of children pending completion of plans for their return was authorized.

In general, to State welfare agencies the problem of returning runaway children to other States does not loom large. About a third of the States do not encounter the problem at all.

The effect of the amendment appears to have been slight. Of the 50 children returned to another State in fiscal 1959 with the aid of Federal funds, only seven were in the age group 16 to 18, and only two children received maintenance, as authorized in the amendment.

Even though the problem of returning runaway children to another State is negligible in relation to other problems dealt with by State welfare agencies, the provision with its amendment is a means of enabling States to meet the individual needs of these children. It also focuses attention upon this special group as an area for broad program planning of State welfare agencies with other agencies that carry responsibility for runaway children.

*The Council recommends that no change should be made in the provision for return of runaway children.*

### **14. Inclusion of Guam**

The 1958 amendments to the Social Security Act changed the definition of State as used under the Act to include Guam, effective for the fiscal year 1960. Until otherwise provided by Congress, the Secretary may, as he may deem appropriate, allot a smaller amount to Guam for child welfare services than would be allotted under the formula.

The Council believes that the needs of children in Guam are the same as in other States and jurisdictions and that the Federal Government should assist Guam through Federal funds and consultation, to develop child welfare services. Reports indicate the lack of public or voluntary child welfare services and great unmet needs in Guam.

*The Council recommends that Guam should receive Federal funds*

*for child welfare services as provided for other States and Jurisdictions.*

### **15. Expanding Children's Bureau Services**

Since 1912, when it was established by Act of Congress, the Children's Bureau has pioneered for a better life for children.

The Bureau began its career by undertaking to learn about why babies died. In 1913 as a Nation we did not know accurately how many babies were born each year, how many died, and why they died. The Bureau then turned to developing standards in many fields of child care—taking leadership in establishing birth registration, working for good adoption practices, juvenile courts, children's institutions, day care centers, county organization for child welfare, illegitimacy, child dependency, fighting child labor abuses, mother's pensions, and many, many others.

Today the Children's Bureau administers \$46,500,000 in grants-in-aid to the States. With help from the Bureau, State public health and welfare agencies have been able to pool Federal, State, and local funds to strengthen and improve maternal and child health, crippled children's and child welfare services. Constant queries reach the Bureau's consultative staff from States and communities, agencies and citizens groups—wanting to know: "Can you help us set up a homemaker service?" . . . "How can we improve our detention home?" . . . "Is our convalescent care outdated?" Within the limits of the size of its staff, the Bureau helps launch new programs, overhaul old ones, or make changes as the case may be.

The Bureau also has served as a reservoir of information on new developments in other States and across the country in the child welfare field. State public welfare departments want to know about new techniques and methods of work, new types of facilities for child care, and new tools for more effective services—and they are asking the Children's Bureau for this information.

Despite its outstanding record, the Children's Bureau has not been able

to contribute in this way as fully as it should. The Bureau has far too little staff to help every State do a good job in child welfare. Seven of the Bureau's nine regions — areas ranging from four to eight States each—have one lone child welfare representative. (Two of the regions also have a foster care consultant.)

This representative's first responsibility is administering Federal grants-in-aid for child welfare services. The remainder of his time he tries to devote to the many public and voluntary agencies and committees who would like to consult with him — committees concerned about migrant, dependent, delinquent, emotionally disturbed, and handicapped children—and the many official and citizens groups working on all types of child welfare services. A big job for one person. There aren't enough hours in the day for this worker to begin to carry it—or enough travel funds for him to get about as he should.

In the field of research, there is not enough staff to find answers to many important questions, such as "Why do so many children remain for so long in foster care? What does this do to them? How are agencies working with parents while their children are away from them?" "How can neglectful parents be helped to do a better job?" . . . "What is happening to children of working mothers?" Without the minds, hands and hearts

of a competent staff no program can achieve its objectives. How, for example, can the Children's Bureau develop and put into practice the newest proven concepts of child welfare services without the necessary specialists? Take the field of foster care for an example. Much has been learned through experience over the years. Formerly, child welfare workers took dependent, neglected, abused children out of their own homes whenever possible, put them into foster home and institutional care. The outward results were satisfying — rosier cheeks, scrubbed bodies, clean clothes. But the inward results were often devastating. In recent years, child welfare people have learned what deep-rooted damage this separation of children from families causes. To child welfare offices come many well-intentioned parents who don't know how to be good mothers and fathers because they had none of their own; girls bearing children out of wedlock with the only help given to them being quick placement of their babies for adoption; children whose bizarre behavior has made them outcasts among their schoolmates and neighbors.

Today child welfare workers try to keep the child in his own home and to help his parents become better parents. As a consequence the call is greater than ever before for home-maker service to safeguard, protect

and stabilize families; for day care to protect children of working mothers through foster family day care homes and day care centers; for agencies geared not to just a single service, but to the great variety of services required if children's needs are to be met — counseling, placement in all types of foster care, work with unmarried mothers and adoptive couples—and perhaps most important of all new professional skills in working with parents and children in their own homes.

Success in strengthening families depends largely on good community planning and organization. The coverage of child welfare services must be so complete that agencies can reach out to and serve all children and parents who need their help—whether they live on farms, in the central city, or in the suburbs, and regardless of income or of the individual problem. To give leadership to States in this complex area requires people with professional skills.

*The Council strongly believes that the Children's Bureau has been seriously handicapped in doing its job because of the lack of sufficient staff. It is incumbent upon the Congress to provide the financial means to enable the Children's Bureau to carry out its functions and duties. The need for additional personnel will become even more critical in the recommended program for expanded services.*

## Recent Publications\*

### Social Security Administration

BUREAU OF PUBLIC ASSISTANCE. *Services for Older People: Role of the Public Assistance Programs and of the Bureau of Public Assistance in Relation to Older Persons.* (Public Assistance Report No. 38.) Washington: U. S. Govt. Print. Off., 1959. 27 pp.

How the public assistance programs serve older persons. Limited free dis-

tribution; apply to the Bureau of Public Assistance, Social Security Administration, Washington 25, D. C.

LOTWIN, GERTRUDE. *A State Revises Its Assistance Standard.* (Public Assistance Report No. 37.) Washington: U. S. Govt. Print. Off., 1959. 40 pp.

One agency's policy and procedures in determination of need within the public assistance programs. Limited free distribution; apply to the Bureau of Public Assistance, Social Security Administration, Washington 25, D. C.

### General

AMERICAN FOUNDATION FOR THE BLIND. *Directory of Agencies Serving Blind Persons in the United States and Canada*, compiled by Hilma Saterlee. (11th ed.) New York: The Foundation, 1959. 222 pp. \$3.

CONDLIFFE, J. B. *The Welfare State in New Zealand.* London: George Allen & Unwin, Ltd., 1959. 396 pp. \$8. (Distributed by Macmillan, New York, N. Y.)

Includes a description of New Zealand's social security system.

U. S. CONGRESS. SENATE. COMMITTEE ON FINANCE. *Temporary Unemployment Compensation. Hearings, 86th Congress, 1st Session, on H. R. 5640, An Act To Extend the Time During Which Certain Individuals May Continue To Receive Temporary Unemployment Compensation.* Washington: U. S. Govt. Print. Off., 1959. 81 pp.

### Retirement and Old Age

GORDON, MARGARET S. "The Older Worker and Hiring Practices." (Continued on page 31)

\* Prepared in the Library, Department of Health, Education, and Welfare. Orders for items listed should be directed to publishers and booksellers. Federal publications for which prices are listed should be ordered from the Superintendent of Documents, U. S. Government Printing Office, Washington 25, D. C.



# Public Assistance:

## Report of the Advisory Council\*

*The Commissioner of Social Security, as Chairman of the Advisory Council on Public Assistance, submitted the Council's report on December 31 to the Secretary of Health, Education, and Welfare and to Congress. The Council had been established, under the 1958 amendments to the Social Security Act, to review the status of the public assistance program in relation to old-age, survivors, and disability insurance, the fiscal capacities of the States and the Federal Government, and any other factors affecting the amount and proportion of the Federal and State shares in the program. The Council's recommendations and findings are presented verbatim below. Supplementary statements on various recommendations were made by five members and are given in the full Report. For reasons of space, they are not carried here.*

### Recommendations and Findings

#### 1. Extension of Coverage of Financially Needy People

*The Social Security Act should be amended to add a new provision for Federal grants-in-aid to States for the purpose of encouraging each State to furnish financial assistance and other services to financially needy persons regardless of the cause of need (including for example, the unemployed, the underemployed, and the less seriously disabled).*

*Excluded specifically from the present public assistance categories are persons in nonmedical public institutions, patients in hospitals for tuberculosis or mental diseases, patients in medical institutions as a result of a diagnosis of tuberculosis or psychosis, and children in foster homes and in public or private institutions. These exclusions have been in the law for some time, and should be reevaluated and studied. In the meanwhile, the new legislation should retain them.*

Despite the scope and cost of current public assistance programs, uncounted numbers of financially needy

families and individuals still can get little or no public assistance help. They may fall between categories of the four federally-aided programs, hence be ineligible for any of them. They may because of limited education or job skills or discrimination not be able to earn enough to live decently and healthfully, yet because they are employed or employable, be debarred from recourse to tax-supported assistance. They may live in a State or locality which cannot or does not provide funds for taking care of them. They may be ineligible for social insurance, or the social insurance benefits they receive are too small to maintain them.

Five different programs meet needs for public assistance today. All have the same broad purposes and are often administered by the same agencies and personnel in the States and localities, but differ in the needy groups they serve and how they are financed. Four, commonly called the special (or categorical) types of public assistance—old-age assistance, aid to dependent children, aid to the blind, and aid to the permanently and totally disabled—are financed from Federal, State and local funds. Although the administration of the special public assistance programs is left to the States, which have considerable latitude under the Social Security Act in determining their nature and scope, Federal grants-in-aid

are conditional on meeting certain requirements, including certain minimum conditions of eligibility.

As a result, since the minimum legal age for receiving old-age assistance is 65, a State, for example, can get no Federal money for helping a desperately needy 64-year-old. Nor is any Federal aid available for a needy 39-year-old woman, no longer eligible for assistance under the aid to dependent children program because her youngest child has passed 18, until she reaches her sixty-fifth birthday and can come under old-age assistance. As another example, although a family breadwinner may be so incapacitated by a physical or mental illness that he has been unable to work for several years, his State can get no Federal money for his care because he does not meet the statutory requirement of being "permanently and totally disabled."

A fifth kind of public assistance program, general assistance, is supposed to cover needy people not covered by the other four programs. No Federal funds are now available for general assistance; only State and/or local funds are used. Understandably, a majority of States place the main emphasis on developing and improving the programs for which Federal funds are available, so by and large general assistance receives less adequate support.

General assistance is in a period—long since passed for the special types of public assistance—of transition from the traditional system of complete local responsibility for both financing and administration of assistance to the needy, to the assumption of some State responsibility. In 18 States, there is no State administrative responsibility for general assistance, and the traditional local poor relief authorities continue to administer the programs and to provide almost all of the financing. In 8 others, the State's supervisory and fiscal responsibility is limited by law to specified situations. In the re-

\* Public Assistance: A Report of the Findings and Recommendations of the Advisory Council on Public Assistance, January 1960.



maining 27, the States assume a State responsibility for general assistance relatively comparable to that exercised for the federally-aided programs.

Obviously, the very States and localities with the most people in need are likely to be those least able to provide financial help. Even where needy individuals and families are not disqualified from local general assistance for one reason or another, and are provided with some tax-supported income, more often than not by any standard it is insufficient. In the majority of States, average payments per recipient of general assistance fall well below even the most generally meager payments in any of the federally-aided programs—aid to dependent children. Strikingly, in December 1958, the average amount per general assistance case (averaging three persons) was \$68.88 per month—about the same as what is paid per person in the federally-aided program for the blind!

In the light of the facts, we believe that a new provision in the Social Security Act for Federal participation in general assistance will give impetus to the States to develop their general assistance programs. Inasmuch as the term "general assistance" has such a variety of definitions in the States, we believe that the new title should be couched in broad terms, to permit inclusion of any person found by the States to be in need, except for those specifically excluded in the public assistance titles of the Social Security Act.

These exclusions have a historical basis. One of the original conditions for a State's receiving Federal aid for its public assistance program was that funds be used to maintain individuals in their own homes rather than in institutions. The objectives of the exclusions were excellent; they brought about an exodus of old people from county almshouses and saved children from going into orphanages. Today, the very wording of the exclusions is dated. But since we do not have the data to act with respect to them, we recommend further study of the current validity of the exclusions.

In recommending Federal grants-in-aid to the States for general as-

sistance, we do not intend that a general assistance program should be considered as a preferred method of dealing with large-scale unemployment if it should again occur. Neither should general assistance be a substitute for unemployment insurance. General assistance would serve the purpose of providing an underpinning for the other social measures by aiding those for whom no other means of support is available.<sup>1</sup>

## 2. Options Available to States

*States should have freedom of choice in determining whether public assistance should be administered as a single program or as separate categorical programs. States should have the following options:*

a. *Establishing, under a new title, a single category for financially needy persons to include all those covered under the existing programs and additional groups of needy persons not now covered, thereby eliminating the separate categories;*

b. *Continuing the present categorical programs and adding a new category of general assistance under the new legislation;*

c. *Retaining one or more of the present federally-aided categories (for example, aid to the blind, which, in a few States, is administered by another State agency) and consolidating the remaining groups of needy persons in a single category; or*

d. *Expanding the existing federally-aided categories to include additional needy persons.*

The recommended new title, providing for Federal aid for general assistance, should represent an offer of help from the National Government to the States, which they are free to accept or not.

States are in various stages of development in their public assistance programs and, therefore, we recognize the desirability of offering them as much flexibility and as many choices as possible if they decide, with Federal aid, to give assistance to a broader group of needy people than is now possible.

For States which want to take ad-

vantage of the Federal offer, the same types of assistance would be authorized as under the present federally-aided categories: money payments to the recipients or, where young children are concerned, on their behalf to relatives, and direct payments to suppliers of medical care such as physicians, hospitals and nursing homes.

The options we recommend are designed to allow the States to organize and reorganize their public assistance programs however they see fit. We hope, however, that under such administrative freedom, the States will want to extend assistance to groups of needy people not now eligible under present public assistance programs, and that they will do away with restrictions unrelated to need.<sup>2</sup>

## 3. Extension of Aid to Dependent Children Program

*Under the existing provisions for aid to dependent children, Federal grants-in-aid are available to the States only for the assistance of children deprived of support or care because of the absence, death or incapacity of one parent. As an ironical result in many States, destitute children living with two able-bodied parents are actually penalized. On the premise that a hungry, ill-clothed child is as hungry and ill-clothed if he lives in an unbroken home as if he were orphaned or illegitimate, the program for aid to dependent children should be expanded to include any financially needy children living with any relative or relatives "in a place of residence maintained by one or more of such relatives as his or their own home."*

In a number of areas in the Nation, the aid to dependent children program has been severely criticized as encouraging unstable family life and unmarried parenthood. We cannot embrace this viewpoint.

Births out of wedlock have been increasing in this country, both in absolute numbers and as a proportion of all births, and so have the number of desertions. These increases show up in the public assistance program

<sup>1</sup> Dissents from this recommendation were made by two members.

<sup>2</sup> Dissents from this recommendation were made by two members.

as well as in society generally. There is some difference of opinion as to whether the program encourages desertion. There are instances of fathers who are unemployed and desert because they see no other way to get their hungry children fed. We do not share the view that a significant number of women deliberately proceed to have babies just to get the meagre amounts allowed for their support (see findings for Recommendation 7). Rather than the aid to dependent children program's being a major cause of social evils, we regard it as a reflection of their existence, just as public assistance programs as a whole mirror, not cause, poverty that results from inadequate educational programs, poor or unavailable vocational training, insufficient opportunities for minority groups, uncorrected physical disabilities, weaknesses in family life and other gaps and inadequacies of our social and economic institutions.

We are opposed to public assistance provisions that seem to put a premium on broken homes. Our deep concern is for needy children, purely as children. We want to encourage and preserve family life. Eliminating the negative eligibility factors that now qualify a child for assistance—that is, a parent must have deserted or died or be incapacitated—will, we believe, strengthen the program positively by helping families to stay together and indeed, even serve to prevent the disintegration of homes.

This does not mean that we recommend discontinuing aid to dependent children now eligible for it. Our recommendation is to expand the program, so that *all* needy children outside foster homes and institutions, whether they be legitimate or illegitimate, orphaned or half-orphaned, victims of a deserting parent or members of a stable healthy family, qualify under the category.

Not only are we concerned over present eligibility requirements, but also over some States' decisions to exclude children from public assistance on grounds of their parents' behavior. We believe that the primary criterion for financial assistance to a needy child should be his need. Whatever may be the steps necessary to correct the social evils

reflected in the aid to dependent children program, we feel strongly that no more should a needy child be punished for his parents' actions, than he should be deprived of financial aid because his able-bodied mother and father lawfully and lovingly together try to maintain a home for him.<sup>3</sup>

#### 4. Residence Requirements

*The great majority of States have residence requirements that, with much resultant hardship, exclude many financially needy persons from public assistance. Federal grants-in-aid should be available only for those public assistance programs imposing no residence requirement that debars any needy person in the State from help to which he would otherwise be entitled.*

When the Social Security Act was enacted in 1935, the States were permitted the option of having residence requirements. If they chose to have them, the law prohibited requiring longer residence than set maximums. Today, in the three adult categories, the States may not require residence for more than five years of the nine preceding application for public assistance. In the aid to dependent children program, they may not require more than one year's residence of the parent or other relative who is the child's caretaker and receives money on his behalf.

For some years there was a trend towards the liberalization of residence requirements in the States. Since 1950, however, very little has been done to relax them. Today only a few States provide that assistance be given without regard to residence. The remainder have varying requirements up to the maximums permitted by the Social Security Act. Many States take no responsibility for the nonresident group.

We think it is time for a change in the matter of State-determined residence requirements for eligibility under the federally-aided public assistance programs. For one thing, Federal financial participation has grown considerably since 1935. For another, beginning with World War

II, State to State migration has greatly increased.

Free movement of people is encouraged by our economic system, which enables the individual to improve his own situation. Many persons move to seek employment. Others, especially older men and women, move to be near relatives or for reasons of health. The head of a dependent family, or a feeble old person, may find himself stranded far away from home, destitute and resourceless, when something happens that through no fault of his own dashes his hope of employment or changes his living plans. The 1959 Governors' Conference recognized the need for change in the present law by recommending that the residence requirements permitted under the Federal Act be reduced to one year.

Most of us regard residence requirements as an anachronism, and see no reason why a needy person should be precluded from getting essential aid solely because he is caught in the technicalities of residence laws. We find no evidence that people move solely to qualify for public assistance. Although in general we firmly uphold the States' rights to have wide latitude in determining the nature and scope of their public assistance programs, we think that State residence requirements are inconsistent with the high degree of national interest reflected by the extent of Federal participation in the public assistance programs.<sup>4</sup>

#### 5. Adequacy of Assistance

*a. In view of the evidence of unmet need, steps should be taken by the Federal, State, and local governments toward assuring that assistance payments are at levels adequate for health and well-being.*

*b. The Federal Government should exercise greater leadership in assuring that assistance payments are at levels adequate for health and well-being. It should promote greater public understanding as to what constitutes a level of living sufficient to maintain health and well-being, and the relationship of present payments to such level. As specific steps toward*

<sup>3</sup> Dissents from this recommendation were made by two members.

<sup>4</sup> Partial dissents from this recommendation were made by two members.



these ends, the Federal Government should exercise leadership in (1) developing up-to-date budget guides, for typical families, showing the items of living requirements and their costs necessary to sustain a level of living adequate for health and well-being; (2) making these budgets available for the guidance of States in evaluating their own budgets; (3) requiring periodic State reporting on budgets in use, and on actual individual payments in relation to these budgets; and (4) publishing periodically information on budgets in actual use in individual States and other data significant in indicating adequacy of appropriations and assistance payments in each State.

Not only is there great variation among the States in their concept of what constitutes adequacy in public assistance, but also in the way they meet the standards they themselves have set. The Social Security Act leaves to each State the responsibility for determining need. But less than half the States fully meet need by their own standards for any of the federally-aided categories. The rest do not. They may impose maximums on the monthly amount of assistance any individual or family may get, or by policy meet only a specified proportion of need, or both.

State policies and practices concerning evaluation of recipients' resources sometimes result in some real need not being met. Assumed resources may actually be nonexistent; this is especially true of the assumption that some income will be forthcoming from relatives even though it may fail to materialize. Or resources may be figured on such a pinchpenny basis that initiative may be discouraged.

For a variety of reasons, payments are often very low. Too often poverty is perpetuated, and people's efforts to maintain a constructive life and move toward self-support are thwarted.

In reaching a conclusion as to inadequacies in present payments we considered various available types of evidence: analyses of practices in regard to the determination of need; actual payments by States as related to their own standards of need; the size of the cash payments as related

to the cost of necessities; and the experience of informed individuals. Special estimates were also prepared by the staff to assist us in evaluating the total financial extent of unmet need. Relevant material will be found in Appendix B [of the full Report].

The estimates suggest that the amount of unmet need in the old-age assistance and aid to dependent children programs range from about one-half billion dollars to about one billion dollars. We are impressed by the magnitude and seriousness of the unmet need the estimates indicate. To meet the need would require an increase of almost one-fifth to more than one-third in current old-age assistance—aid to dependent children costs.

The responsibility for providing adequate assistance is shared between Federal and State governments. The Federal Government does not set required standards for determining need, and we are not proposing that it do so. We do believe, however, that the Federal Government should exercise greater leadership in assuring necessary State action to provide adequate assistance.

We have recommended extending coverage to additional groups of needy adults and children (Recommendations 1 and 3). We would not, however, want this to be effected by reducing assistance to the present categorical groups. Already there is too much unmet need among them.

We recommend certain specific steps that the Federal Government should take toward promoting greater public understanding as to what constitutes a level of living sufficient to maintain health and well-being. These are enumerated in our recommendation.

We regret that except for minimum food requirements, there is no comprehensive national standard of living compatible with health and well-being, either in terms of essential items or their quantity, quality and cost. Such a standard is not impracticable for the actual cost of living throughout the United States varies much less than most people think. The observable differences in the way different groups in different areas live are more the product of regional or local attitudes and culture than of

significant price differences for basic items.

More current, scientific budgets like the U. S. Department of Agriculture's for one item, nationally developed and available to the States, would, we believe, have a far-flung effect in raising standards of assistance in States where they are at a low level.

We believe, therefore, that the Federal agency should develop essential budget guides and publish periodic information about the practices of individual States so that the citizens of each State and of the Nation may be in a position to judge the extent to which the assistance programs are meeting their objectives. In this way there will be public understanding and support of additional legislative and appropriative actions that may be required.

Public assistance alone cannot overcome poverty in situations where opportunities to earn are chronically inadequate for large numbers of people. Other types of action are required which will enable families with employable members to be self-supporting. Such action may include the development of additional educational opportunities, promotion of additional job opportunities, economic development programs for both industrial and farm areas, particularly distressed areas, and programs which will assist in improving conditions of migratory workers.

So long as public assistance continues at substandard levels in areas where large groups are living in poverty, this should be made known so the Nation may utilize its full resources to help overcome such conditions.

Pertinent also to the question of adequacy are the variations of eligibility requirements among the States. We disapprove eligibility requirements that are either ultra-liberal or ultra-restrictive.

The absence of more clearly defined eligibility standards is a serious defect in the entire federally-supported welfare program. The wide range among the States in standards of (a) support from legally responsible relatives; (b) property and income exemptions; (c) purposes to which income may be applied; (d)

disposition of insurance benefits including those from old-age, survivors, and disability insurance; and (e) recoveries and assignment of personal property and real estate goes beyond a reasonable latitude.

We recognize the difficulty of achieving greater uniformity of eligibility conditions. We suggest, however, that the Federal agency continue to examine present practices and to evaluate them in terms of their effect upon adequacy and to make this information available to interested groups.<sup>5</sup>

## 6. Adequacy of Medical Care

*a. Since it appears that future public welfare costs may increase largely because of increasing medical care needs and costs, Federal and State governments, in cooperation with nongovernmental agencies, should take a more active role in stimulating more comprehensive medical services of high quality, including preventive services.*

*b. Steps should be taken by the Federal, State, and local governments toward assuring that health services available to public assistance recipients are comprehensive in nature and of high quality. Improvements in medical care should not be accomplished by reducing money payments to recipients.*

*c. The Federal Government should exercise greater leadership in stimulating and encouraging States to extend the scope and content and improve the quality of medical care for which assistance payments are made to or on behalf of needy individuals. As specific steps toward this end, we recommend Federal leadership in (1) developing guides to States for evaluating and moving toward improving their programs of medical care; (2) requiring periodic State reports on types and amounts of medical care for which assistance is paid; and (3) publishing periodically comparative State data secured from these reports and other information that will promote greater public understanding about needed medical care.*

*d. The Federal agency should es-*

*tablish a broadly constituted Medical Care Advisory Committee to advise it on all aspects of medical care in public assistance.*

We are concerned by the wide incidence of medical need in the public assistance group. By its very nature, it includes those most in need of medical care, like the disabled, the aged, and children from disorganized families, yet least able to pay for it.

The original Social Security Act specified that all payments must be made to recipients or their legal guardians only in money. This was to protect needy people's right and freedom to manage their own affairs, like other members of the community. But primarily for practical and administrative reasons, since 1950 financial assistance for medical needs may be paid either to the recipient or to the supplier of medical care, such as physician, hospital or nursing home. Direct payments to suppliers of medical care are often called vendor medical payments.

Differences among States in the amounts and kinds of medical care provided through public assistance programs indicate glaring defects in the way medical needs are being met in some places. Not many States provide assistance for comprehensive medical care. Some pay only for a single item. In a State that pays only for hospitalization, a needy diabetic on public assistance, for example, may not be helped to get insulin. But if, as a result, his diabetes worsens and his leg becomes gangrenous and must be amputated, public assistance will foot the hospital bill.

Another indication of unmet medical need is the small average amount spent per recipient of public assistance for vendor medical payments which, in most States, represent the largest share of assistance expenditures for medical care. During March 1959, among recipients in the categorical programs, nationwide, the average expenditures for the permanently and totally disabled were \$9.75, for old people \$8.15, for the blind \$4.96, and for dependent children \$1.69. Comparable averages for general assistance are not available, though it is known that in some areas

they are only a few cents. To be sure, the known averages are lowered by the inclusion of all those public assistance recipients who do not get any assistance for medical care. But in view of the fact that, nevertheless, they may badly need it in one form or another, and in comparison with what anyone knows from personal experience about the cost of hospitalization, nursing home care, drugs and physicians' services, the sums expended show up as pitifully insufficient. People in metropolitan areas think of medical help as available from many sources and without charge to needy persons. But in most communities outside sizable urban areas, the public assistance agency is the only resource—public or private—to which needy people can turn for help beyond what is available from their families and churches.

The Federal Government should exercise greater leadership in stimulating and encouraging States to extend the scope and content and improve the quality of medical care for which assistance payments are made to or on behalf of needy individuals. This involves many areas of medical care and service. We think that it is especially important to move rapidly toward great improvement in the quality of care in nursing homes.

The guides proposed in our recommendation could be used in evaluating State programs and in helping the States to establish and maintain medical services adequate in amount and kind. To this end, there also ought to be increased medical staffing for the Bureau of Public Assistance.

The increasing costs brought about by new medical discoveries and methods tend to increase the costs of public welfare. But the "comprehensive medical services of high quality, including preventive services" which we recommend, are likely to be a long-run economy. Low income and poor health work in a vicious circle. Malnutrition, untreated physical handicaps, debilitating chronic conditions, and the like, do not make for vigorous self-supporting people. In many cases, families who have lived even well above assistance levels may be forced by prolonged illness and unusually heavy medical expenses to use up their assets, and eventually

<sup>5</sup> Partial dissents from this recommendation were made by two members.



turn to assistance. Preventive medical care, particularly geriatric, may keep old people independent and ambulant who, without it, are headed toward being bedridden.

## 7. Equitable Treatment Among Categories

*Currently there is an often striking disproportion in payments in the same State among the public assistance programs; for example, old-age assistance payments tend almost everywhere to be relatively more adequate than aid to dependent children payments. States should be encouraged to apply the same assistance standards to all categories of needy persons, and to ensure that similar treatment is accorded to persons in similar circumstances, regardless of the particular form of public assistance. By similar we do not, of course, mean identical. Obviously there are differences in the living requirements of, for example, a 66-year-old public assistance recipient living alone in a large industrial city and a 4-year-old child living with a rural family. But determination of the extent of need and the amount of assistance, including payments for medical care, can and should be realistically related to known facts about these differences, without partiality for one categorical group as compared to another.*

All 50 States, the District of Columbia, Puerto Rico, the Virgin Islands and Guam administer programs with Federal aid for old-age assistance, aid to dependent children, and aid to the blind. All but five of the States, among the 54 jurisdictions, have federally-aided programs for the permanently and totally disabled.

We have already pointed out in the findings for Recommendation 1, how general assistance which is not now federally-aided, is the most inadequate of the public assistance programs. But even among the federally-aided categories of public assistance aid to dependent children is downgraded in comparison to the others. The average monthly payments September 1959 were about the same for adults—\$69.18 for the blind, \$64.79 for the aged, and \$63.66 for the dis-

abled. But the national average amount paid per recipient of aid to dependent children, in the same month, was only \$28.58—below half the lowest national average of the adult categories.

Some of these great differences may be caused by the relatively larger incidence of exceptional needs, especially for medical care, among the aged, blind and disabled. The lower Federal maximums—currently \$30 per recipient per month for aid to dependent children against \$65 per recipient per month in the adult categories—have undoubtedly also influenced State programs. Another probable cause of financial partiality for adult recipients of assistance—albeit with some exceptions, is that they have a voice in community affairs; many, indeed, were and may still be highly articulate and influential citizens. Dependent children, on the other hand, not only cannot speak for themselves, but by and large also come from such a low socio-economic group that their relatives rarely speak for them.

We have reason to believe that even regardless of other causes for their plight, dependent children are the stepchildren of public assistance because States set the lowest assistance standards among the categories for their maintenance, medical care or unusual needs. Psychological, emotional and moralistic factors, whether they be overtly expressed or rationalized, generally underlie the discrimination. We are convinced it would lessen substantially with the adoption of our Recommendation 3. But in any case, opposed to inequities among the federally-aided categories, we favor working toward a single State assistance standard of meeting needs for them all.

We gave consideration also to another kind of inequity among categories. Only in the aid to the blind program does Federal law require income to be disregarded in the determination of need and the amount of assistance payment. In the other categories this is not permitted.

From time to time there have been proposals—particularly in the aid to dependent children program—that recipients be allowed to retain a portion of their earnings for their per-

sonal use. The "pro" arguments are that a child would not only be helped to learn to hold a job and to take adult responsibility for managing money but also get satisfaction from his work; that encouraging both children and adults to work is consistent with the objective of self-support and self-care.

The "con" arguments are that disregarding income is contrary to the basic concept that public assistance is a means test program supplemental to the applicant's other resources; that it tends to confuse public assistance with social insurance; that it discriminates against persons without earnings, usually the elderly and the sick, who need the most help; and that it might well delay any substantial improvement in a State's standards of assistance. Where children specifically are concerned, there is danger that virtually forcing them into employment tends to depress wages and working conditions, for children are usually hired because they are cheap and will put up with conditions adults would not accept; that they are likely to be employed when unemployed adults are available; and that bright youngsters, perhaps potential scientists, might become bogged down in blind-alley jobs.

We frankly see no clear-cut answer to the proposals for disregarding income. We make no specific recommendation on the subject. Actual data on the practical value, if any, of exempting a limited amount of earned income in the aid to dependent children program would be desirable. Hence some of us think that for a specified trial period—say five years—the Federal law ought to be amended to give States the option of such an exemption, and that the experience thus acquired should be evaluated by the Bureau of Public Assistance in terms of incentives to self-support, strengthening family life, and the principle of similar treatment of needy people in similar circumstances.

## 8. Community Participation and Use of Voluntary Agencies

*The Federal Government should encourage each State to (a) stimu-*

late public interest and increase public knowledge of the role of public welfare programs; (b) establish appropriate advisory committees; (c) utilize services of voluntary agencies, when available and qualified, to serve recipients of public assistance; and (d) involve private as well as public organizations in studying problems of family disintegration and breakdown, and developing coordinated programs for strengthening family life.

A State's fiscal capacity is by no means the only factor in determining its standard of assistance or the extent of unmet need among assistance recipients. Public opinion is a potent force, and State and local attitudes towards the needy, the causes of their need, and what their minimum standard of living ought to be, make for an adequate or inadequate public assistance program.

Citizens of a democracy, in order to be intelligently effective, must be well informed. It is our impression that too many of our citizens either are ignorant of our vast public assistance program or have mistaken ideas about it. The more the community becomes part of the public assistance program the better it will be.

Towards this end we suggest that the community be kept informed on facts, on figures, and on needs in human terms, through the usual channels of written and spoken communication; local newspapers, local radio and television, and speakers at meetings of church groups and civic and social clubs. Voluntary workers used at the public assistance agencies not only can perform many needed services that consume precious staff time but also can become a liaison with the community. Appropriate advisory committees, composed of such representative individuals as physicians, clergymen, educators, and business people can further knit an informed community with a just and merciful public assistance program.

Private as well as public organizations should be, we feel, an integral part of a comprehensive plan for helping the needy. From the beginning of settlement in this country, relatives, friends, neighbors, religious groups and privately organized agencies have voluntarily helped the

needy and otherwise unfortunate.

The number of voluntary agencies in large urban centers increased during the 20th century. However, since they were overwhelmed by the financial demands of the needy during the depression of the 30's, and since the provision of tax-supported financial assistance to the needy by the 1935 Social Security Act, their primary function has not been to give money. It is, rather, to render a wide variety of services.

A few examples are counseling on personal problems and family situations; vocational guidance; foster home care for children or old people; group living facilities for those who cannot live alone; adoption services; day care centers for children of working mothers; and homemaker services that help children or old people remain in their own homes instead of going to institutions.

We are aware that voluntary groups and agencies and public agencies often work together now. The more systematic and consistent this involvement becomes, we believe, the broader and deeper, in human terms, the public assistance program can be. We are impressed with the fact that public assistance programs deal with people whose problem is not poverty alone. They have a complex of problems, aggravated in each instance by poverty.

Public assistance agencies consider it part of their job to help people find a place to live, stay in touch with relatives, keep their children in school, and generally to help them with day-to-day practical problems. Indeed, in any but sizable urban areas they are the only secular agencies giving such services to the needy. But almost everywhere public assistance staff are overburdened with too many cases to work thoroughly with each, and almost nowhere are there public assistance agencies with sufficient staff adequately trained to deal with the really difficult problems that recipients face.

Voluntary agencies also have their limitations of staff and financing. Thus, the job to be done is greater than the resources of both combined. Coordinate planning of both agencies in a community is essential if their limited resources are to be most effective.

used. In some instances the needs of people can best be met by referral of the individual to an appropriate agency—voluntary or public.

Authorities agree that many needs are not met by any agency. Both public and voluntary agencies should study the community problems, particularly those related to family disintegration and breakdown, and work closely together in developing programs for strengthening family life. The wholehearted partnership of public and private agencies is the best assurance of a job well done.

## 9. The Federal Share

*Under present conditions, the proportionate Federal share of total public assistance expenditures, including general assistance, for the Nation as a whole, should not be less than is currently provided under the Social Security Amendments of 1958. For the present, the over-all average Federal proportion for all States combined, for all public assistance expenditures, including general assistance, should fall between approximately 50 and 60 percent.*

Before the 1946 amendments to the Social Security Act, the Federal Government paid about 40 percent of all public assistance payments, including general assistance. Amendments in 1958 — the seventh increasing the Federal share of public assistance costs — brought Federal funds for January-June 1959 to 52 percent.

Although we are aware of the concern of President Eisenhower and others over the continuous rise of the Federal proportion of public assistance funds over the years, we are recommending that the proportionate Federal share of total public assistance expenditures, including general assistance (see Recommendation 1) be no less than is currently provided.

One of the reasons for our recommendation is the magnitude of the unmet need we discovered (see Recommendation 5) and the realization that where it is concentrated may be the very place where it is least likely to be met by the State or locality. That inadequacies tend to be most

serious in States with low fiscal capacity is obvious. But it is not so obvious that such States are likely to spend a relatively high proportion of their funds for public services in general. If public assistance is the most inadequately financed among these services, it may be because of some unwillingness to spend State-local money upon it. But more often a financially-straitened State if it wants to improve the adequacy of its assistance payments, is faced with the alternative of dangerously weakening its other public services. We believe that the national government should assume that share of assistance costs which, demonstrably, State and local governments and private sources cannot meet.

Throughout the Nation, many States are burdened today by heavy fiscal responsibilities. State expenditures have risen steeply and so have State debts. From 1948-1958, State and local tax collections increased from \$13.3 billion to about \$30.5 billion, and their indebtedness rose from \$19 to \$57 billion. Current political realities do not promise a sufficiently rapid increase in State appropriations to make possible any immediate reduction in the Federal share for public assistance.

Furthermore, we do not find the Federal share of public assistance programs unduly high in relation to the Federal share of other Federal-State programs. For example, the Federal share of vocational rehabilitation averages slightly more than 60 percent for the Nation as a whole.

The facts available to us did not indicate any possibility, under present conditions, of any sizable decreases in the need for public assistance. Hence we have no evidence that might warrant a decrease in Federal responsibility for them. Indeed, most social and economic factors indicate a probable increase in total costs of public assistance; the growing numbers of the aged and of children, rising living costs especially for medical care, family disintegration in our complex urban culture and increasing displacement of workers by automation and other changes in industrial and agricultural methods.

We have considered the concern

expressed in some quarters, that the present degree of Federal responsibility assumed for public assistance, endangers the authority or responsibility of State-local governments. We have found no convincing evidence to support this viewpoint.

Our recommendation that the over-all Federal proportion for all States combined, for all public assistance expenditures, including general assistance, should fall between approximately 50 and 60 percent for the Nation as a whole, is derived from the figures that the Federal percent nationally for all assistance expenditures, including general assistance, for January-June 1959 was 52.0 percent, for the federally-aided programs by themselves, 59.4 percent. This, however, was but a single period. The over-all Federal percent for the Nation as a whole is somewhat variable and is likely to remain so, since it results from and reflects variations among the several programs and among the States from one period to another.<sup>6</sup>

## 10. The Federal Amount

*To enable the public assistance program to expand or contract sensitively with changing conditions, the amount of the Federal appropriation should remain "open-end"; that is, the amount should be the total necessary to match State-local expenditures for public assistance under the formula specified for Federal financial participation, with no limiting predetermination of what the total shall be.*

Our recommendation that the Federal amount be "open-end" is based on the thinking expressed in the last paragraph under the preceding recommendation, and on our ideas stated in paragraph 4 under Recommendation 2, that Federal financial participation should not hamper the States' flexible use of assistance funds. Any limiting predetermination of amount in a changing economy like ours might seriously damage the effectiveness of public assistance programs.

<sup>6</sup>A dissent from this recommendation was made by one member, and two members presented explanatory statements.

## 11. The State Share

*All States should exert fiscal effort for public assistance commensurate with their ability to do so in relation to their State-local resources.*

*The States should take steps to modify the financial burden on localities for public assistance if the availability and adequacy of assistance is adversely limited by local financing or resources.*

"Fiscal effort" is the proportion of total income in a State that is used for public assistance. No satisfactory measure of "equitable" fiscal effort among States now exists. Albeit we appreciate that the development of one would be a long-time, difficult job, we believe that studies should be undertaken towards this end. A measure of equitable fiscal effort among States should take into account income that can reasonably be expected to go into public services, the need for public assistance in the State, and the relationship between public assistance and a desirable balance of maintaining other public services. Such a measure would not only give a realistic basis for assisting and stimulating each State to bear its full and just share of public assistance costs, but would also be useful in fiscal considerations of other governmental functions.

At present a concept of "equal" fiscal effort is generally used. Equal fiscal effort would be achieved if all States drew off into public assistance the same proportion of personal income. Naturally, the amount of revenue or expenditures per capita would vary as per capita income varies among the States.

Current fiscal effort among the States, far from being "equal," does not even correlate with income. As a rule, the States with per capita income at or above the national median devote a smaller proportion of total income to public revenue than the States with income lower than median; because of their greater resources, they are able to provide more adequate services, yet use less of their citizens' personal income.

Although, as we pointed out in paragraph 3 of the findings for Recommendation 9, some of the lowest-



income States make the greatest fiscal effort in their public services, albeit not for public assistance, the fact remains that the most unmet need generally occurs in these States. Clearly, when a considerable portion of a State's population needs financial help, a smaller proportion are taxpayers who can provide that help. For several low-income States, average personal income is actually less than some high-income States' average public assistance payments per recipient.

Despite the fact, then, that many of the lowest-income States not only use inadequate living standards to determine need for public assistance, but also meet less than 100 percent of need by those very standards (see Recommendation 5), a large proportion of their population receive some public assistance. Were standards adequate and needs fully met, a so much larger proportion would be getting financial help that public assistance would be a major rather than a supplementary support to such States' economy.

We recognize that it would not be feasible as a continuing public policy, to provide income adequate for health and well-being through the public assistance program, to the large proportion of needy individuals and families who now, in the lowest-income States, regularly subsist far below the generally accepted American standard of living. Indeed, even if such provision were practicable, considering the social and economic consequences with which it is fraught, we question the wisdom of making it. Other measures, outside and beyond the scope of public assistance programs, are needed to strengthen the general economy of our financially disadvantaged States. We believe that their problems should be studied with a view to steps for reducing their incidence of inadequate income and to bring down needs for public assistance.

This is a large order involving a broad program. But meanwhile, even the lower-income States ought to take more responsibility for general assistance than most States do now. In 16 States, localities now pay all the costs of general assistance. In 4 additional States, localities finance

90 percent or more of it. In the Nation as a whole, in fiscal year 1959 localities bore nearly half of general assistance costs, as against their eight percent financial contribution to federally-aided programs. The Social Security Act, as we have pointed out previously, requires State financial participation in the special types of assistance, to ensure State-wide operation and a greater degree of adequacy and equity than is possible under the method of local responsibility for the poor.

The extent of reliance placed on localities, tax-wise the weakest of any level of government, is, we believe, the chief cause of the present inadequate state of general assistance. Just as we have recommended Federal participation to help the States improve this program (Recommendation 1), we now recommend substantial participation in it by the States. Nowhere should financing general assistance be left, solely or primarily, to those localities that are relatively resourceless and inadequately financed.<sup>7</sup>

## 12. Equitable Distribution of Federal Funds

*The specifications of the Federal formula determining the Federal proportion for individual States should recognize variations among States both in fiscal ability and incidence of need to a greater extent than the present formula does. The formula provisions of the Social Security Act should be amended to provide that Federal percents for individual States will be related to interstate variations in fiscal ability and need for the total of assistance expenditures in which the Federal Government participates, instead of only part of such expenditures as under the present formula. The Federal provisions should specify limits to the range among States in Federal percents; that is, the minimum and maximum percent to be received.*

In the findings for the preceding recommendation, we described how some States, although they try as

hard as wealthier States to meet financial need, or harder, are unable to do so. Despite our firm conviction that within broad limits the States should have freedom to define and administer their public assistance programs as they see fit, for this is in line with the value Americans place on experimentation and diversification, we consider inadequacies and inequities in public assistance a matter for national concern. Consequently we think that the Federal government should do more than it does now to equalize the fiscal capacity of the States.

The present formula that determines the Federal share of assistance payments in each State is in terms of average payments per recipient per month. The maximum matchable amount is \$65 in the adult categories, \$30 in the aid to dependent children program.

The formula is in two parts, with the Federal ratio different for each. The first part is constant and applies to all States equally. The Federal Government contributes four-fifths of the first fraction, \$30, of each monthly payment of \$65 or less to adults, and  $\frac{14}{17}$  of the first \$17 of each \$30 or less monthly payment in the aid to dependent children program.

The second variable part gives some recognition to differences in per capita income among the States. Before 1958 the matching share of Federal payments up to the specified maximums per recipient was 50 percent for all States. A 1958 amendment provided for an "equalization" formula, whereby the matchable Federal share for the second fraction of assistance payments remains 50 percent for the States above-average in per capita income, but ranges from 50 to 65 percent for the below-average per capita income States.

The amendment, a compromise between equal and equitable treatment of the States, was, we believe, a step in the right direction. It has helped the lowest-income States make somewhat higher assistance payments than would otherwise be possible. Also, the proportionately high Federal share available for the smaller payments tends to have some equalizing effect.

<sup>7</sup> A dissent from this recommendation was made by one member.



We are not satisfied, however, with the present formula for Federal participation. Since the proportion of Federal participation is so much greater in the lower, constant fraction of payment, than it is in the differential between that and the maximum, too many States fail to go above giving any more than meagre, below-minimal financial help.<sup>8</sup>

### 13. Federal Maximums

a. *Maximum amounts of assistance expenditures in which the Federal Government will participate should continue to be specified, as now, in terms of an average amount of all assistance paid per recipient, including both money payments to recipients and payments to suppliers of medical care.*

b. *The specified maximums should be high enough so as not to hamper State efforts to provide assistance at levels adequate for health and well-being and to meet rising costs of basic living requirements and medical care. Current Federal maximums should be raised accordingly.*

c. *Any difference in Federal maximums specified for different groups of needy people (for example, per adult and per child), should be reasonably related to available knowledge about differences among the groups in the cost and content of their living requirements. The current Federal maximums for aid to dependent children do not meet this criterion, and should be raised to an equitable relationship with the other programs.*

The 1958 amendments to the Social Security Act specify that Federal financial participation in public assistance be based on an average of State payments to all public assistance recipients, rather than on individual payments as had been the case before. This desirable change permits both greater flexibility in meeting individuals' "unusual" needs and simplifies fiscal procedures for determining State claims to Federal funds.

Federal maximums are merely fiscal devices to limit the Federal share, and from the beginning have never

been intended to indicate any standard of adequacy for assistance payments.

Under the current formula, the fact that Federal participation in meeting unusual need is available (providing that total average payment does not exceed the specified Federal maximum) makes it possible for the States to meet at least some of it. Moreover, with the average-payment maximum the elaborate procedure of relating every payment to the Federal maximum is no longer necessary.

In the findings for Recommendation 5 we have already discussed concepts of assistance levels adequate for health and well-being, and in that for Recommendation 6, medical needs in particular. The current Federal maximums fall below levels needed to achieve better standards of assistance than the States now use. We have pointed out that assistance payments are inadequate in many States. Even so, in September 1959 many States' average payments per recipient equaled or exceeded the Federal maximums; in 34 States for aid to the blind, in 28 for aid to the permanently and totally disabled, in 29 for aid to dependent children, and in 25 for old-age assistance. Any further increases have to come from State-local funds.

We believe that Federal maximums should be high enough not to hamper or discourage States' efforts to provide adequate assistance. They should be raised immediately to meet current costs of basic living requirements and of medical care. In line with Recommendation 7, they should be calculated on an equitable basis among the categories. The current Federal maximums for aid to dependent children do not meet this criterion, and should be raised to an equitable relationship with the other programs. They are in fact, less than half the amount for the adult programs. Available information indicates that a maximum for the children's program that is three-fifths of the amount needed for the others would be more nearly related to differences in need.

We consider arbitrary maximums undesirable, for in our ever-changing economy with its fluctuating prices

and time-and-place employment opportunities, maximums need to be not only adequate but also flexible. However, for two reasons we recognize the practical necessity of setting some fiscal limits and controls on Federal expenditures. One is the lack of a definitive national minimum standard of living discussed in the findings for Recommendation 5. The other is that the appropriation for public assistance is open-end; that is, as long as a State complies with certain Federal statutory conditions it may have as many needy people on its public assistance rolls as conditions require.

### 14. Single Federal Matching Formula

*To promote equitable standards among the different categories, a single formula for Federal financial participation should be used, to apply to all categories of assistance and to all assistance expenditures.*

We reiterate the principle of equitable treatment among categories and our belief that similar treatment should be given to all needy people in similar circumstances, regardless of the reason for their need. The same Federal percentage of contribution in all categories, and Federal maximums that vary only to reflect actual differences in need, are ways to implement the principle.

### 15. Transition Period

*In the event that a revised formula would result in reduced Federal funds for any State, a transition period should be provided to permit States to adjust to such changes, either by postponing the effective date of revised legislation or by building into the formula a device for gradual reduction in the Federal share over a period of years.*

A substantial Federal increase would be necessary for the Nation as a whole to prevent decreases in any State under an extended public assistance program (see Recommendation 1) and a variable grant formula. Legislation embodying our recommendations might result in some States receiving more Federal money

<sup>8</sup> A dissent from this recommendation was made by one member.

and others less than at present.

If a State does not elect to provide federally-aided assistance to all financially needy people (see Recommendation 2) it might receive a smaller amount of Federal participation for the current federally-aided categories than it does now. On the other hand, if a State does elect to provide federally-aided assistance to all financially needy people, it could, particularly under adverse economic conditions, receive a larger amount of Federal funds than it does now.

We are convinced that States' potential fiscal problems do not negate the soundness of the principle of Federal sharing for all categories of needy people, on a basis variable in accordance with the States' per capita income.

However, since a sudden substantial reduction of Federal funds summarily is likely to hurt needy people, we recommend that the States be given a reasonable period of years of adjustment, during which, if they wish, to extend their assistance programs and/or arrange through State-local funds to carry costs now federally-covered.

## 16. Administrative Costs

*The Federal share of administrative costs for public assistance should remain at 50 percent for the Nation as a whole, and for each State.*

Administrative costs, like assistance payments vary widely among the States. In general they reflect the States' fiscal ability and the scope, level and quantity of services provided.

Combined administrative costs, per case per month in the fiscal year 1958 ranged from \$0.82 to \$11.18 for old-age assistance, \$1.46 to \$24.52 for aid to dependent children, \$1.45 to \$18.27 for aid to the blind and \$1.67 to \$15.60 for aid to the permanently and totally disabled. The size of each public assistance worker's caseload per month, ranging from 500 to just under 100, varied inversely with the amount spent.

In States where administrative costs per case are relatively high, staff have relatively more time to explore financial resources and to help

people develop their personal potentialities for self-support, self-care, and strengthened family life. Individuals and groups, especially those in the public welfare field, have questioned whether the public assistance programs in low-income States having low administrative costs and huge work-loads can be administered efficiently and economically enough to do full financial justice both to the needy and to the community as a whole.

Questions about administrative costs, especially in States at either extreme of spending, have also been raised by Congressional appropriations committees primarily concerned with the rising costs of administration. They have inquired, do the cost differences among States reflect differences in efficiency and economy? Are the highest-cost States perhaps overspending?

A 1954 study resulting from these concerns revealed that since the lion's share of administrative costs is for service, the wide difference in the size of the caseload visitors carry accounts for 72 percent of variation among the States. Three other factors are differences in the rates of other employees to caseworkers, 17 percent; salaries, 10 percent; administrative costs for items other than services, 1 percent. The States whose high administrative costs were particularly questioned came up with such convincing data on the relation between spending money on administration and saving it on assistance payments, that amendments under consideration, to limit Federal sharing in administrative costs below the present 50-50, were not made. Statements of those of the members of the Council with knowledge and experience in the administration of public assistance confirm that the current provisions are working satisfactorily.

## 17. Training and Personnel

*a. In order to improve administration, promote social rehabilitation, and help prevent dependency, States should increase the numbers and raise the qualifications of personnel administering the public assistance programs.*

*b. To assist States in increasing*

*the number of their qualified staff, the existing Federal matching provisions for educational leave programs should be amended to provide 100 percent Federal funds for training of public welfare personnel, as is provided in other specialized fields.*

*c. As an aid to increasing generally the present short supply of social workers, it is recommended that, in addition to grants for other groups, 100 percent Federal funds be made available to accredited graduate schools of social work for the training of persons in such fields as strengthening family life and caring for the needs of the aging.*

*d. States should take such action as is necessary to assure that the salaries of public welfare personnel are established and maintained at levels required to obtain and retain competent personnel, in order to provide the services required by public welfare recipients.*

Most public assistance agencies are understaffed. Some limit services to determining and checking on need. Only a few State public assistance agencies provide directly such special services as homemakers, volunteer aides, or foster homes for the aged. Some persons are accepted and remain on public assistance for want of intensive effort directed towards solving their employment, family housing, emotional or physical health problems.

In demonstration projects, groups of typical assistance recipients whose workers carried small caseloads were compared with equally typical groups whose workers carried large caseloads. Consistently, the activities of the public assistance workers concerned with relatively few individuals and families paid off in terms of reducing assistance payments.

The quantity of visitors, however, is only one element in the staff deficiencies of current public assistance programs. Their quality is another. Although hospitals do not attempt to treat patients without having qualified doctors on their staffs, latest available figures show that public assistance agencies must make out with only 2 percent of qualified social workers among their caseworkers, and about 15 percent in addition with



partial social work training. We deplore the fact that even some of these have their skills and energies drained off in nonprofessional activities, and urge the States to take steps to ensure that all professional staff be productively used for the strictly professional service they alone can give.

Social work is so young among the "helping" professions that many people do not really know that it is a profession nor what it encompasses. A qualified social worker has had at least two years of postgraduate study at an approved school of social work and of supervised experience. He is schooled in why human beings behave as they do and has the skills to help them make the most of themselves. Also, he learns about community organization, and how to use community resources.

The widespread lack of social work training among public assistance workers compels agency supervisory staffs to give more or less satisfactory in-service training. Increasingly, agencies are giving "educational leave" under the 50-50 provision for Federal participation in administrative costs, so that staff members can get real professional training. As against 1954, when only 118 individuals from 19 State welfare agencies went to schools of social work, 40 agencies sent 392 to school in 1958. We heartily approve this trend, and recommend that to accelerate it, there be not 50 percent Federal participation as now, but 100 percent Federal funds for the professional training of public welfare personnel. Similar Federal training grants exist in fields like medicine, vocational rehabilitation, mental health, and the physical sciences. Surely it is equally appropriate and vital to the nation to support a profession that contributes to efficiency and economy of administration, and at the same time furthers the happiness, well-being and independence of individuals.

There is a nationwide shortage of social workers. But there is an even more acute shortage of social workers in public assistance. One reason is that scholarships are available in other fields of social work. We therefore recommend that 100 percent Federal funds be made available to accredited schools of social work for

professional training in fields of social work needed in public assistance agencies as well as voluntary agencies, such as work with the aging and strengthening family life. Another reason for the shortage of both qualified social workers and others in public assistance agencies is that the caseload required and the salaries paid cannot compete with working conditions and pay in other governmental or in voluntary agencies. In 1958, the turnover of public assistance employees, professional and nonprofessional combined, was very heavy. Separations were at the rate of 22 per 100 jobs; the accession rate was 27 per 100 jobs.

### 18. Strengthening Family Life

*a. The Congress should appropriate funds authorized under the Social Security Amendments of 1956 for grants for research and demonstration projects such as those relating to the prevention and reduction of dependency, coordination between private and public agencies, and improvements in social security and related programs, and research leading to strengthening family life.*

*b. We recommend the establishment of a National Institute which would have the responsibility for studies and demonstration programs leading to strengthening of family life.*

Although the people coming to the assistance agencies need more than money, and the agency staffs often lack proper training for their complex responsibilities, large sums of tax revenue are continually spent and intimate details of many people's lives are involved. The cost of carrying on the daily job and the pressures on overloaded staff to deal with applicants and recipients make virtually impossible any research or experimentation in improved ways to prevent or meet need.

We regret that the Congress has never appropriated the money to implement the authority, enacted 1956, for research and demonstration activity, and we recommend that it do so now. Numerous Federal grants are made to States and to voluntary agencies for research and demonstra-

tion projects in the fields of biology, mental health, psychology, education and others. We believe that similar investment in exploration of the problems brought to public assistance agencies would likewise pay dividends both in human and fiscal terms. Research and demonstration related to the causes and prevention of dependency are especially necessary because public assistance functions in an ever-changing setting.

A National Institute dedicated to discovering the best means possible of solving social problems like family break-up and chronic dependency is as appropriate and desirable in a democracy as the existing National Institutes of Health.<sup>9</sup>

### 19. Strengthening Social Insurance

The Council supports the generally accepted principle underlying the American social security system that the social insurance programs should provide the primary defense against the common risks to economic security. The Council regards the strengthening of the social insurance programs as an important objective of public policy. Because of the close relation between any extension or improvement in social insurance and the extent of need for public assistance, the Council has taken note of the major proposals for changes in the old-age, survivors, and disability insurance program and in the State unemployment insurance programs that have been advanced in recent years. It has not attempted to resolve the issues relating to all of these proposals; it has, however, reached conclusions regarding some that would have an immediate impact on public assistance. As desirable steps, the Council recommends the following:

*a. Coverage under the contributory wage-related program of old-age, survivors, and disability insurance should be extended to include as many additional workers as possible not now covered under any public retirement system; in particular, the*

<sup>9</sup> A dissent from part (b) of this recommendation was made by one member.



program should be extended to such additional farm and household workers as it is feasible to cover.

b. *The proper Federal authorities should take all feasible measures to assure that everyone who is covered by law under the old-age, survivors, and disability insurance program does in fact have his covered earnings reported and recorded to his credit, so that he will receive the full amount of benefits to which he is entitled. Additional effort in this respect seems to be particularly necessary for migratory farm workers.*

c. *The provision that disability insurance benefits can be paid under the old-age, survivors, and disability insurance program only to people age 50 and over should be eliminated; benefits should be paid to qualified disabled workers regardless of age.*

d. *Benefit levels under the old-age, survivors, and disability insurance program should be adequate and kept in line with the growth of the economy; to this end, increases in wage and price levels should be appropriately reflected both in benefit amounts and in the maximum amount of earnings taxable and creditable toward benefits.*

e. *The Federal-State unemployment compensation system should be extended to improve its protection of the unemployed.*

f. *Continued attention should be given to strengthening the contributory wage-related social insurance programs with particular view toward reducing need for public assistance.*

We reaffirm the principle that the social insurance programs should be the first line of defense against income loss through any of the commonly shared hazards of life—unemployment, old age, or death or disability of the family wage earner. Through such programs, individuals receive benefits as a matter of right without the necessity of an inquiry into their needs. People know that benefits will be available, in addition to the accumulation of savings and private insurance resulting from their own individual efforts to achieve security.

In accordance with our legislative mandate, our recommendations on

social insurance deal especially with the old-age, survivors, and disability insurance program, as indicated above. We recognize that there are many other possible ways of strengthening the social insurance programs. For example, under the provisions of old-age, survivors, and disability insurance, widows' pensions are now very small, both relatively and absolutely; only three-fourths the amount that would have been payable to the husband or one-half to the couple. We doubt whether these proportions would be justified by differences in living requirements. Another example might be to change present provisions to assure that people in recently covered groups and presently close to retirement age will be able to qualify for benefits without being required to work in covered jobs as long as is now required by law. We did not consider in detail all the other possible modifications in old-age, survivors and disability insurance that might have some impact on public assistance.

All of us agree to the pressing importance of meeting medical care needs, particularly those of older persons. Their inability to pay for medical care is one reason they have to turn to public assistance, and unless there is going to be some organized program of prepayment of medical costs, the burden on public assistance is almost certain to increase. We all agree, too, that while adequate health services should be available through the assistance programs for those who cannot get them any other way, providing these in this way, is not the most desirable method of dealing with the problem.

Some of us strongly support expansion of the old-age, survivors, and disability insurance program so that it includes designated health service benefits, with costs covered by prepayment through increased social security contributions. Others believe that they have not studied the matter enough to be ready to make either this or alternative proposals.

We also gave attention to proposals that all aged persons not eligible for old-age, survivors and disability insurance benefits or for benefits under a public retirement program, be "blanketed-in" under the insurance

program and receive a minimum monthly benefit. We recognize that there are considerable numbers of aged persons who were never eligible for old-age, survivors and disability insurance; the largest group among them consists of widows whose husbands died before coverage was extended to the husband's particular occupation. Minimum benefits for this group would be analogous to the past service credits under some private pension plans.

But we have not recommended blanket-in. Many among the ineligible group have been able to make independent provision for their old age and are reasonably well-to-do; others can rely on sons or daughters or other relatives. Using public funds to provide them with a small pension does not seem to us to rate high priority among social objectives. Moreover, any blanket-in plan likely to be feasible would still leave a substantial need for public assistance; most of the persons now on old-age assistance are getting payments considerably higher than those proposed as the minimum pension, and would continue to need supplementary income for maintenance as well as for medical care and social services.

Probably the most serious objection advanced to blanket-in was that a minimum pension from old-age, survivors and disability insurance funds, for those who have made no direct contribution to old-age, survivors and disability insurance, would be a very real threat to the wage-related, contributory character of the insurance program. The consensus was that the possible advantages of blanket-in, at the present time, are far outweighed by the importance of preserving and strengthening the basic social insurance program.

## **20. Periodic Review of Program**

*The status of the public assistance programs, including their adequacy in promoting health and well-being, the formula for Federal financial participation in public assistance costs, and their relationship to social insurance programs should be reviewed and reevaluated by an Advisory Council at least once every 5*

*(Continued on page 36)*

# State Public Assistance Legislation, 1959\*

*The 1959 legislative sessions were, in most States, the first since the enactment of the 1958 amendments to the Social Security Act. Much of the public assistance legislation adopted was related, directly or indirectly, to these changes in the Federal law, as shown in the following survey.*

**M**OST State legislatures met in regular or special session in 1959. Although fewer public assistance laws were enacted than in earlier bienniums, the varied pattern of previous years was repeated. No major trends are apparent; rather, the 1959 legislation reflects both interest in the gradual broadening of program scope and concern with program and administrative detail. In general, more laws were passed in States that incorporate in their statutes specific program and administrative provisions. There was relatively little legislative activity in States where the statutory pattern gives the administrative agency more flexibility to adjust to developments and needs in the State program and to changes in the Federal law relating to public assistance.

During 1959, as in earlier years, major factors in stimulating State legislative bodies to consider and act upon public assistance measures were the amendments to the public assistance titles of the Social Security Act. In 1958 the most significant amendments to these titles were the provisions changing the method of determining the Federal share in the assistance programs. Since the passage of the Social Security Act, Federal financial participation in money payments to recipients had been related to the maximum on the amount of an individual payment that was subject to Federal sharing. Effective October 1, 1958, however, Federal sharing in State assistance expenditures became subject to a limitation based on an average payment per recipient. The new limitation covers both money payments to the recipi-

ents and payments to vendors for their medical care; from July 1957 through September 1958, medical care had been separately financed.

The amendments also changed the basis for computing the Federal share of State expenditures. Since September 30, 1958, a portion of the Federal contribution has been determined by the relative fiscal ability of the State, measured by per capita income. According to the revised formula, the Federal Government continues to pay \$24 of the first \$30 per recipient of old-age assistance, aid to the blind, and aid to the permanently and totally disabled. Instead, however, of paying half the remainder within an individual maximum of \$60, the Federal Government now pays 50-65 percent of the balance of expenditures up to \$65 times the number of recipients. The exact percentage that each State receives is related to its per capita income for the most recent 3-year period.

The Federal share in the program of aid to dependent children continues at \$14 of the first \$17 per recipient, but the Federal share in the remainder, up to an average limitation per recipient of \$30, is related to the individual State's per capita income. As in the adult programs, the formula covers both money payments to recipients and payments to vendors for their medical care.

Although 50-50 matching was continued for Puerto Rico and the Virgin Islands, a new and somewhat higher Federal limitation was set—\$35 per recipient in the adult categories and \$18 per recipient in aid to dependent children, including both money payments and payments for medical care. Congress applied the same formula in extending Federal participation in public assistance expenditures to the Territory of Guam. At the

same time, Congress increased the dollar limitation on the total amount of Federal funds paid annually for public assistance to Puerto Rico and the Virgin Islands and established a similar limitation for Guam.

## Payments to Recipients

Following the 1958 amendments, which made available for each State some additional funds, many States took various actions—legislative and administrative—to increase payments to recipients. Maximums or other limitations on individual assistance payments were made less stringent or, in some States, eliminated. More often, States raised the cost standards for certain basic items included in their standards for the requirements of recipients. Among the States that require legislative approval before some specified changes can be made, there were a few that revised their statutory limitations on money payments to assistance recipients.

There has been a tendency for some States to regard the maximum established as a limit for Federal participation in assistance expenditures as a limit on the monthly payment to an individual recipient. Under the new Federal formula based on the average expenditure per recipient, this tendency should be minimized. The removal of State maximums makes for a more flexible and equitable administration of assistance and enables a State to relate its assistance payments more realistically to unusual needs, especially need for medical care, in individual cases.

Two States adopted legislation removing the maximums on the amount of an individual assistance payment. South Dakota revised its law to provide for an average expenditure per recipient of \$65 in the programs for the aged, the blind, and the disabled—the same as the average matchable expenditure under the Federal act. In aid to dependent children the average expenditure per recipient was set at \$35, which is \$5 more than the

\* Prepared in the Division of Program Standards and Development, Bureau of Public Assistance.



Federal law specifies for matching purposes. In Ohio the legislature removed the maximums in old-age assistance, aid to the blind, and aid to the permanently and totally disabled.

Legislative changes in maximums were made in a number of States. Alaska increased the maximums in the two major programs of old-age assistance and aid to dependent children. In old-age assistance the increase raised the maximum from \$90 to \$100. In aid to dependent children, the maximum was raised from \$60 to \$80 for the adult person responsible for the child's care and for the first dependent child; there was no change in the maximum (\$30) for each additional child.

California enacted legislation, effective January 1, 1960, relating to maximums on payments to the aged, the blind, and the disabled. In old-age assistance the maximum for basic needs was set at \$95 (formerly \$90), but recipients with special needs may receive as much as \$115 if their income plus the basic grant does not meet the total need. Another change increased the maximum in aid to the blind \$5, to \$115. Needy persons receiving aid to the permanently and totally disabled may be paid an amount that is equivalent to actual needs, but the total cannot exceed an average monthly expenditure of \$98 per recipient. There is also a provision for establishing a standard of assistance in this program, with an amount for basic needs not to exceed \$106. Within the limits of the average expenditure per recipient, the agency may provide for payment of an additional amount to individuals whose condition requires attendant services.

In Indiana the maximum on payments to recipients of old-age assistance was increased from \$60 to \$70. This amount may be exceeded to meet certain special needs.

Early in 1959, Missouri adopted legislation increasing the maximums on individual money payments and providing for payments in excess of these amounts in certain circumstances. The result was to raise from \$60 to \$65 the maximum money payment in old-age assistance, aid to the blind, and aid to the permanently and totally disabled. In aid to de-

pendent children the maximum was established at \$32 each for the first child and the needy eligible relative and at \$23 for each additional child. There was also an increase to \$65 in the maximum payable to an individual recipient in general assistance. Payments up to \$100 a month, however, may be made to or on behalf of a public assistance recipient who is totally disabled and completely bedfast. If the amount of available funds is insufficient to pay the full amount of aid to each recipient, a pro rata reduction is to be made in all payments.

Minnesota increased from \$90 to \$115 the amount of old-age assistance that can be paid when the recipient requires congregate or foster care or the services of a homemaker or a housekeeper, under standards established by the Department of Public Welfare and approved by the county board.

In Nebraska the maximum payment under aid to dependent children for the first child was increased from \$85 to \$100 a month. Vermont raised maximums in old-age assistance, aid to the blind, and aid to the permanently and totally disabled from \$63 to \$75 and in aid to dependent children from \$32 to \$45 for the eligible adult, from \$40 to \$45 for the first child, and from \$23 to \$25 for each additional child.

The 1959 appropriation act in the State of Washington included several provisions affecting standards of assistance and payments. The act limits the standards of assistance for any payments to applicants and recipients to reasonable allowances for shelter, fuel, food, clothing, household maintenance and operation, personal maintenance, and necessary incidentals. Amounts provided for clothing and personal incidentals when the recipient is in a nursing home or hospital cannot be more than 50 percent of the amount that would be included if the recipient were living in his own home. In Nevada the appropriations for old-age assistance were sufficient to increase the average payment by \$4.50.

### **Medical Care**

The formula for determining the limitation on Federal sharing in State

public assistance expenditures is now, as noted earlier, based on an average expenditure per recipient instead of a maximum on each assistance payment. This average amount includes expenditures in the form of both money payments to recipients and medical care payments on their behalf. From July 1957 through September 1958 the Federal Government participated financially under a separate formula in State expenditures for medical care and any other remedial care in behalf of public assistance recipients. The Federal Government paid one-half such medical care payments within an average monthly expenditure of \$6 per recipient in the programs for the aged, the blind, and the disabled and \$3 per dependent child and \$6 for the relative caring for the child under aid to dependent children.

Many State public assistance programs include provisions for meeting the medical care needs of recipients. Under the stimulus of Federal legislation in 1956 and 1958 relating to the financing of medical care, the States have gradually been broadening the scope of their activities in this area. It is noteworthy that States with low per capita income are responding to this stimulus and taking significant action relating to their provisions for meeting the medical care costs of public assistance recipients.

Legislation in Missouri authorized the Division of Welfare to make medical care payments on behalf of recipients of public assistance to provide inpatient hospital care for medical emergencies and acute, serious illness. Such payments may be made in addition to the maximum money payments. The law also provides for an advisory committee of seven members (including at least three physicians), appointed by the director of the Division of Welfare, to provide professional and technical consultation on the medical care aspects of the program.

When California provided for medical care in its public assistance programs in 1957 the legislation did not include the program of aid to the permanently and totally disabled, which was established late in the 1957 legislative session. In 1959 the legislature authorized a monthly de-



posit of \$6 per disabled recipient into the premium fund from which vendor payments are made for medical care to recipients of aid to the permanently and totally disabled.

In Arkansas, 1957 legislation made it necessary for the Department of Welfare to expend a specified portion of the appropriation to provide hospital care to public assistance recipients at the State University Medical Center. The 1959 appropriation act makes funds available to the department to meet the cost of hospital care for recipients at the medical center and at other hospitals on the same basis.

The Florida Legislature provided \$625,000 a year to pay the cost of hospitalization for assistance recipients. The funds are appropriated to the Department of Health and may be transferred to the Department of Welfare if necessary. The two departments are directed to enter into an agreement for carrying on such a program with Federal financial participation.

North Carolina amended its law relating to payments for hospitalization of assistance recipients to provide for payments to out-of-State hospitals. It also enacted legislation prohibiting the payment of any public welfare or public assistance funds for care of any person in a nursing home or home for the aged that is owned or operated by members of public welfare boards and certain other bodies, officials of public welfare departments, and relatives of such members and officials.

The South Carolina Department of Public Welfare was authorized by law to provide hospital care to recipients of public assistance, including general assistance, through vendor payments. Provision was made for financing the program by withholding from the portion of the annual State income tax that is allotted to the counties a sum equal to 30 cents per capita. Approximately \$735,000 a year will be available to the Department of Public Welfare from this source. The money thus made available will be expended throughout the State, without relation to the county from which taxes are withheld.

Texas had previously amended its constitution to allow legislation that

would provide a hospital program for public assistance recipients. A bill to implement the constitutional amendment failed to pass when it was considered in relation to available revenues.

In West Virginia new legislation related to the authority of counties to make contributions to the medical services fund of the State Department of Public Assistance. "Non-State aid" counties that have met the cost of services under the State medical plan solely from county funds may now contribute to the State fund and benefit from Federal funds available for this purpose.

Under a Vermont law, 30 percent of the cost of hospital and nursing-home care rendered eligible individuals will be met by local governments. Hospitalization is limited to 10 days in a year. The new law was implemented by an appropriation of \$125,000 in State funds.

### *Legal Representative*

Some States have encountered difficulties in invoking guardianship laws and procedures on behalf of assistance recipients. In recognition of the problems presented by two States, Congress amended the Federal law in 1958. Beginning July 1, 1958, money payments to recipients include payments on behalf of an individual made to another person who has been judicially appointed as his legal representative for the purpose of receiving and managing his assistance payment, whether or not he is his legal representative for other purposes. The effect of this amendment is to allow Federal participation in payments to recipients of public assistance made under laws already effective in the two States.

Two additional States enacted laws following the Federal amendment. North Carolina provided for a personal representative under certain conditions for recipients of old-age assistance, aid to dependent children, and aid to the permanently and totally disabled. The South Dakota Code was amended to provide that the county court may appoint a guardian for recipients of public assistance to receive and manage their assistance payments.

Montana passed an atypical guardianship statute limited in application to the program of aid to dependent children and giving rise to a question of Federal financial participation. The law provides that, when it is found that the parent or adult caretaker is not properly using the assistance payment for the needs of the children, he shall be named as their guardian. He must then, as guardian, render an accounting to the court on the expenditure of the assistance payment.

### *New or Expanded Programs*

In 1958 Congress extended the provisions of the public assistance titles of the Social Security Act to the Territory of Guam. Legislation enacted by the Territorial legislature in 1959 established in the Department of Finance a division of public welfare, with responsibility for administering the four federally aided programs of public assistance. The Territory's public assistance plans were approved by the Commissioner of Social Security, effective July 1, 1959, and Guam became the fifty-fourth jurisdiction with public assistance programs under the Social Security Act.

Iowa enacted legislation to provide aid with Federal financial participation to disabled individuals aged 18-65. The legislation was passed as a rider to an appropriation bill for the biennium ending June 30, 1961. Under the law, the term "disabled" is administratively defined, and effective January 1, 1960, the State put into operation a program of aid to the permanently and totally disabled. Iowa is the fiftieth jurisdiction with such a federally aided program. Alaska, Arizona, Indiana, and Nevada do not have such programs.

Nebraska enlarged its definition of total and permanent incapacity to include mental as well as physical impairment under its program of aid to the disabled. The amendment includes a limitation on the expenditure of State funds during the biennium for aid to mentally impaired individuals. Aid to dependent children was extended to children up to age 18 if they are attending school and maintaining satisfactory grades

or if they are physically or mentally incapacitated.

In New Jersey, a new statute brings within the scope of the program of aid to dependent children those children living with any of the relatives specified in the definition of a dependent child under title IV of the Social Security Act. Formerly, the program was limited to children living with the mother or woman standing in loco parentis.

Wisconsin amended its definition of total and permanent disability to liberalize its program of assistance to disabled persons. In Oregon, amendments deleted the words "permanently and totally" from the statute providing for aid to the permanently and totally disabled. The program is now identified as "aid to the disabled." The term "disabled" is defined, as formerly, to mean having a bodily impairment that is both permanent and total.

### *Residence and Citizenship*

Several States adopted legislation liberalizing their residence requirements in one or more of the federally aided programs, and one State lengthened the qualifying period.

New Jersey eliminated its 1-year residence requirement in aid to dependent children under a new statute that makes major program and administrative changes, effective January 1, 1960.

Maine, Ohio, and Vermont lowered their requirements. In Maine the residence requirement for old-age assistance, aid to the blind, and aid to the permanently and totally disabled was reduced to 1 year of continuous residence immediately preceding application. Maine also enacted legislation providing for an interstate compact on welfare services under which other States would join with Maine to make welfare services available on a reciprocal basis to persons who move from one State to another. Such persons would not be ineligible for a welfare service because of failure to meet a State's residence or settlement requirements. Under the compact, welfare services would include the four federally aided assistance programs, as well as general assistance, child welfare services,

care of unwed mothers, and welfare medical services to needy persons. Ohio reduced the residence requirement in both old-age assistance and aid to the blind to 3 out of the most recent 9 years. Vermont lowered the residence requirement in those programs and also in aid to the permanently and totally disabled to 2 years out of the 6 years immediately preceding the application for assistance.

California and South Dakota made other changes in their residence provisions. A California law provides that a recipient may remain outside the State for more than a year without presumptive loss of residence if illness or other good cause prevents his return. South Dakota clarified and broadened the residence requirement in aid to dependent children. As amended the law includes children who have resided in the State 1 year before application, who are living with a parent or other relative who has so resided, who were born within the year and whose parent or relative has resided in the State 1 year before the child's birth or application, or who are eligible under the terms of a reciprocal agreement with another State.

Arkansas formerly had a residence requirement of 1 year in each program. New legislation would require an applicant for old-age assistance, aid to the blind, or aid to the permanently and totally disabled to reside in the State 3 out of the past 5 years, with continuous residence during the year preceding the application. The State has interpreted the new legislation as not excluding an individual who has lived in the State 5 of the past 9 years, which is the maximum permitted under the Federal act.

Several amendments to the Michigan law relate to residence requirements for State programs other than the federally aided public assistance programs. An increase to 2 years in the eligibility requirement for hospitalization of children will, however, affect children receiving aid to dependent children.

Indiana authorized a comprehensive study of the effects of residence requirements under the public welfare and poor relief laws. A special committee of the Legislative Advisory Commission is to make the study and

submit its report before September 15, 1960, for transmittal to the State Legislature.

Legislation relating to citizenship as a condition of eligibility was enacted in two States. Ohio placed assistance to the aged on the same basis as its other federally aided programs by repealing the citizenship requirement in old-age assistance. California legislation eliminated, in its program of assistance to the disabled, the requirement that noncitizens shall declare under oath that they desire to become citizens.

### *Relatives' Responsibility*

In the 1959 sessions several States enacted legislation with respect to the responsibility of relatives for needy persons. For the most part, the provisions were amendatory and clarifying rather than new legislation; to the extent that there was legislation, it indicated concern for strengthening State provisions for the support of children.

Legislation in California, affecting all programs, releases the relative from responsibility for the support of a parent if the relative had been deserted for 2 years before reaching age 18. Connecticut amended its provisions for old-age assistance and aid to dependent children to require the agency to investigate the financial condition of close relatives (husband, wife, father, mother, and children), determine their ability to support under a contribution scale established by the agency, and notify them of their requirement of support. Another law affecting aid to dependent children defines "stepparent" and provides that, in the determination of need, the ability of a stepparent to provide for the support of his minor children living with him shall be considered in the same way as that of a natural parent. This State also made several changes in the statutes pertaining to payments to welfare authorities under various support orders.

Amendments to the Illinois Public Assistance Code clarified the authority of the State agency and the county departments to file support actions directly as well as by requesting the State's attorney to file the actions. The statute spells out the



responsibility of spouses for each other and of parents for children, including children born out of wedlock and legally adopted children. Other Illinois statutes relating to the support of dependents were also amended.

A new law in the State of Washington prescribes the powers and duties of the State's attorney-general and certain local law-enforcement officials to take action under appropriate State statutes to enforce support of dependent children who are not receiving proper care or support or who have been abandoned. The welfare department is to notify these officials when children are receiving or about to receive aid to dependent children, foster-home care, or other assistance. The law also provides that the assistance payment shall not be withheld or reduced as the result of a support order under the act when the support has not been provided.

### ***Special Provisions in Aid to Dependent Children***

There was increased interest in the program of aid to dependent children during the 1959 legislative sessions. This program provides assistance and services chiefly to children deprived of parental support or care because of the absence from the home or the physical or mental incapacity of a parent. Increasingly, it is serving the needy families of the Nation that have the most serious and complex social and economic handicaps. In some States, bills were introduced proposing measures directed particularly towards families in which there were illegitimate births. The extent of legislative interest in those proposals varied. The fact that few such bills were enacted indicates growing recognition of the complexity of the problem and realization that the solution is not to be found in measures that would deny aid to children whose need for assistance and services is clearly established.

A Colorado amendment provides for vendor payments for nonmedical needs in aid to dependent children under certain conditions, with a proviso that the measure will not go into effect until such expenditures are matchable under Federal law.

An amendment adopted in Florida sets forth seven criteria for a suitable home, including the effect of the birth of an illegitimate child in the home since the receipt of aid to dependent children. The law also provides that, on a finding that one or more of the criteria exist, the county board shall continue aid and shall work with the family to make the home suitable. If that effort fails, the board shall arrange either for the children's placement with relatives, with the consent of the mother, or referral to the court for determination whether the children should be placed elsewhere or remain in the home. At the same time, a provision in the appropriation act prohibited the payment of assistance for a child living in a home considered unsuitable under State law. An opinion of the Attorney General said that the amendment to the law governing aid to dependent children would not deny aid to any eligible child and thus in effect resolved the potential conflict with title IV of the Social Security Act.

In Louisiana a law was enacted, subject to approval under the Social Security Act, that would exclude from the program for dependent children those children who are born out of wedlock and who have two or more siblings who are illegitimate. The law was found unacceptable by the Social Security Administration as the basis for an approvable State plan under the Federal act.

An amendment to the Illinois law requires that the home of children receiving aid to dependent children shall be visited at least once in each 3-month period to determine continuing need and to provide services to parents and children. Wisconsin amended its law relating to eligibility for aid to dependent children so that aid may be granted in certain situations in which action to compel support has been instituted and the court order is either insufficient to adequately meet the child's needs or is unenforceable.

In Washington the appropriation act prohibits payments under aid to dependent children for an employable parent or relative with whom the child is living unless it is determined that such employment is detrimental

to the physical or mental well-being of the child. North Carolina enacted a measure, with a proviso that no action would be taken if it did not meet the requirements of Federal law, requiring the State Board of Public Welfare to give each solicitor of the Superior Courts a list of all mothers living in his district who are receiving aid to dependent children so that he may ascertain whether they are refusing to support their children. This measure was found to be unacceptable as part of an approvable State plan under the Social Security Act.

### ***Property Limitations and Need Determination***

Several States adopted legislation relating to the effect of ownership, assignment, and transfer of real and personal property on eligibility for assistance or to the consideration of an individual's income and resources in determining need and the amount of his payment.

Missouri increased the amount of cash or securities that the needy recipient of old-age assistance, aid to the blind, or aid to the permanently and totally disabled may retain. The amount was raised from \$500 to \$750 for a single person and from \$1,000 to \$1,500 if the recipient is married and living with his spouse. In aid to dependent children the limit on the family's personal property was raised from \$1,000 to \$1,500. In Nebraska a resolution of the legislature directed the State Division of Public Welfare to increase from \$500 to \$750 the maximum available resources that may be owned by a recipient of public assistance. A family may have up to \$1,500.

The Nevada Legislature dealt specifically with its program of aid to the blind. It removed any limit on the value of real property used as a home and stipulated that all real or personal property exceeding \$1,500 in value, less encumbrances, be used to meet current needs. A vehicle of reasonable value necessary for transportation is not considered as personal property. The proceeds of the sale of real property may be retained for 1 year for the purpose of buying a home. Nevada also increased from



\$90 to \$100 the minimum amount that a blind individual is presumed to need to provide the necessities of life. (In this program the first \$50 of earned income is disregarded, as provided under Federal law.) Another law provides that food and shelter furnished to a recipient of aid to the blind is to be regarded as income in computing the amount of the assistance payment for which he will be eligible.

North Dakota amended its old-age assistance law to exempt personal property, designated by the applicant or recipient and valued at less than \$300, from being transferred in trust to the State Department of Public Welfare. Ohio is another State that enacted specific legislation on property and income limitations in one of its public assistance programs. The old-age assistance law was amended to remove the \$960-a-year limitation on income as an eligibility condition. The homestead exemption was increased from \$6,000 to \$12,000. The amount of insurance that may be held for burial expenses was raised from \$300 to \$500, and an identical increase was made in the amount of insurance that a recipient may hold without placing it under agency control.

In California there were several changes, technical and clarifying in nature, concerning property holdings. One amendment relates to the retention of proceeds from the sale of real property; the proceeds are considered real property for a period of 1 year if they are held for the purpose of purchasing a home. The amendment makes clear that the provision applies to conversions occurring before the application for assistance.

Connecticut, Florida, and Minnesota amended their provisions governing the period of time within which an assignment or transfer of property made before the application for assistance might affect eligibility. Formerly, in Connecticut, an applicant for old-age assistance or aid to dependent children was not eligible if he had assigned or transferred property within 3 years before his application, without reasonable consideration, in order to qualify for assistance. An amendment deletes the 3-year limit on such transfers and also

provides that ineligibility shall continue only as long as the fair value of such property would furnish support at a reasonable standard of health and decency.

Florida reduced to 2 years the time limit on property assignments and transfers made to qualify or maintain eligibility for old-age assistance. Formerly transactions of this kind made within the 3 years immediately preceding the application disqualified the individual for assistance. In Minnesota the law had prohibited the payment of assistance to an individual whose spouse, living with the person, had assigned or transferred property for the purpose of qualifying either person for old-age assistance. In 1959 this provision was liberalized by limiting its application to transfers made under such circumstances within 5 years before the date of the application for assistance.

Montana enacted a law stipulating that, in determining need and the amount of the assistance payment to members of the recognized Indian tribes, per capita payments from tribal lands or tribal profits not exceeding \$100 a year are to be disregarded. This law has a saving clause providing that it is to be effective only when Federal law permits.

### ***Safeguarding Information***

Indiana amended its law providing for public access to certain records of public assistance disbursements in order to broaden the scope of the information available regarding recipients of old-age assistance and aid to dependent children. Louisiana further strengthened its provisions that declare all public assistance records confidential by adding the words "not subject to waiver." This phrase precludes the recipient from permitting information from the case records to be made available to outside sources, including insurance companies, bill collectors, and others, for purposes unrelated to the administration of public assistance.

Wisconsin law now requires that any person other than a public officer may inspect public assistance records only upon signing a statement that contains his address and the reason for seeing the record. The law fur-

ther requires that the agency notify the recipient of the fact and give him the name and address of the person inspecting the record within 72 hours of such inspection. A North Carolina amendment authorizes members of the county boards of public welfare to inspect records concerning applications for public assistance on file in the office or in the custody of staff of the county director of public welfare; it prohibits the board members from disclosing any information thus acquired.

### ***Organization and Administration***

During their 1959 legislative sessions, Alaska and Hawaii, in the organization of their State governments, authorized extensive changes from the patterns under the Territorial form of government. In Alaska, State health and welfare functions were merged in a new Department of Health and Welfare under the direction of a Commissioner of Health and Welfare; he is appointed by the Governor, subject to confirmation by the members of the legislature in joint session. In Hawaii the reorganization act provides for a Department of Social Services and a Department of Health. The Department of Social Services will have varied functions previously carried by independent agencies, including the provision of medical care to recipients of assistance and to the medically indigent. The act also specifies the qualifications of the chief of the Department of Social Services.

Seven other States made changes affecting the way in which their public welfare responsibilities are carried out. Florida increased the membership of the State welfare board, which administers the public assistance and related welfare programs, from seven to nine members, appointed by the Governor and confirmed by the Senate. One member is appointed from each of the congressional districts and one member from the State at large.

A new Indiana law established a committee to act in an advisory capacity to the State Department of Public Welfare in administering the public welfare provisions relating to

assistance to the needy blind. The law specifies the qualifications of the five members, to be appointed by the Governor. Kansas law now makes it possible for any county to appoint a committee to advise the county board in welfare matters, subject to the rules and regulations of the State Board of Social Welfare. It no longer makes mandatory the appointment of such a committee in counties where more than 500 persons receive assistance.

New Jersey enacted a new law relating to the program of aid to dependent children. Effective January 1, 1960, responsibility for this program is placed with the Bureau of Assistance, which will supervise its administration by the county welfare boards along with the other federally aided public assistance programs. Formerly, aid to dependent children was administered by the State Board of Child Welfare through its district offices.

In the area of financing, the non-Federal share of North Dakota's program of aid to dependent children will be financed 75 percent from State funds and 25 percent from county funds; formerly the cost was on a 50-50 basis. Iowa repealed the law that levied a head tax on adults formerly paid into the old-age assistance fund and abolished the liens charged against property for delinquent head taxes.

In the field of staff training and recruitment, Florida designated \$23,064 to be used during the biennium for educational scholarships and training for public assistance positions in consultation with Florida universities and colleges offering such training. Iowa removed the requirement that all employees of the State Department of Social Welfare must have resided in the State at least 2 years immediately before applying for employment, as well as the prohibition against requiring a college education as basic qualification for county welfare professional personnel.

Illinois, Iowa, and Texas authorized existing or new groups to carry on broad study and analysis of public welfare matters in their States. An Illinois law continues the Commission on Public Aid and Assistance

and appropriates funds for its work for a 2-year period. This group has membership representing the State Legislature and the general public and is studying all matters pertaining to public aid and assistance in the State.

The Iowa Legislature established a committee of six senators and six representatives (with both political parties equally represented) to inquire during the next 2 years into all matters relating to public assistance and relief in Iowa. The study is to include but is not limited to the categorical assistance programs, county poor relief, and soldiers' relief and to their administration.

In Texas the legislature created a coordinating commission to study State health and welfare needs. The commissioners of the State departments of employment, education, health, and welfare are members and are to report trends, developments, and needs to the Governor and the Legislative Council and suggest ways to coordinate efforts to meet the needs.

### *Aging*

Continued interest in the needs of the aging and the aged and the provision of services for them is reflected in various legislative actions that directly or indirectly affect the public assistance program.

The Illinois Legislature added a new section to the Code that gives to the Public Aid Commission detailed statutory authority to provide services for older persons; these services had been carried on under a general authorization since 1950. Under the new law the Commission's Advisory Committee on the Aging becomes the Council on the Improvement of the Economic and Social Status of Older People. The legislature also continued for a third biennium the Commission on Aging and Aged, which consists of 15 members—five each from the house and senate and five from the general public appointed by the Governor. This group is analyzing and assessing existing knowledge and programs related to problems of the aging and aged in the State and will report to the next session of the legislature.

In Maine, where the authority of the Committee on Aging was due to expire, the legislature established a permanent State Committee on Aging to continue the study of the problems of the State's aging population and assist in organizing local committees. Maryland established a Commission on the Aging as an advisory body to the Governor to study existing services, coordinate the programs of agencies and departments working with the aging, and report annually on its findings.

Related legislation in a number of States was concerned with the need for facilities for individuals requiring nursing and other personal care and with the establishment and maintenance of standards for these facilities.

Two States adopted legislation to foster the establishment of facilities for the care of the aged and of nursing homes. Illinois authorized the purchase, construction, operation, and maintenance of homes for the aged by the counties. These homes are to be licensed by the Department of Public Health. Aged persons may be admitted who are able to pay rent through private means, public subsidy, or both. Comparable legislative action occurred in North Dakota. A revolving fund of \$1 million will be available to the Public Welfare Board to make loans to counties and non-profit corporations to construct nursing homes and homes for the aged. Homes for the aged will be subject to the regulations of the State Welfare Board, and nursing homes will be regulated by the State Health Department.

In five States the legislation related to their standard-setting provisions for nursing homes and similar facilities. Indiana made various changes in its law relating to licensing, regulation, and inspection of nursing homes. The homes now included under the law are those with more than two unrelated patients, rather than one or more as formerly. Another change prohibits advertising the conduct, maintenance, or operation of a nursing home through any advertising medium before a license is granted, and it provides for action to enjoin such advertising.

*(Continued on page 35)*



# Current Operating Statistics

Table 1.—Selected social insurance and related programs, by specified period, 1940–59

[In thousands; data corrected to Jan. 7, 1960]

Year and month	Total	Retirement, disability, and survivor insurance										Unemployment insurance					
		Monthly retirement and disability benefits <sup>1</sup>				Survivor benefits						Temporary disability benefits under Railroad Unemployment Insurance Act <sup>9</sup>	State laws <sup>10</sup>	Veterans' legis-lation <sup>11</sup>	Rail-road Unem-employment Insurance Act <sup>9</sup>		
		Social Security Act	Rail-road Retirement Act	Civil Service Com-mis-sion <sup>2</sup>	Veterans Ad-minis-tration <sup>3</sup>	Monthly				Lump-sum <sup>7</sup>							
						Social Security Act <sup>4</sup>	Rail-road Retirement Act <sup>5</sup>	Civil Service Com-mis-sion <sup>2</sup>	Veterans Ad-minis-tration <sup>3</sup>	Social Security Act	Other <sup>8</sup>						
1958		Number of beneficiaries															
November		9,415.7	485.3	321.0	2,891.2	3,014.5	236.3	130.7	(12)	50.3	12.6	31.1	1,922.9	27.7	106.6		
December		(11)	485.2	323.2	2,898.3	(11)	236.8	132.5	1,193.3	(11)	13.3	36.0	2,175.8	29.8	129.4		
1959																	
January		9,509.5	485.0	324.8	2,899.4	3,056.3	236.1	133.6	(12)	109.6	13.4	36.7	2,612.5	33.0	139.9		
February		9,597.9	489.0	326.9	2,900.4	3,076.9	238.2	135.0	(12)	61.3	15.3	27.0	2,588.4	31.5	103.8		
March		9,723.6	493.5	329.0	2,901.2	3,103.8	239.1	136.4	1,203.9	72.7	15.9	25.8	2,356.1	25.9	83.4		
April		9,833.5	496.8	331.2	2,912.3	3,133.9	240.4	137.9	(12)	71.9	17.7	24.4	2,028.1	19.3	68.7		
May		9,910.3	498.5	333.0	2,923.7	3,157.4	240.7	139.2	(12)	65.6	15.3	20.2	1,588.1	12.7	42.9		
June		9,997.9	501.0	335.9	2,934.2	3,183.5	242.7	140.6	1,210.4	65.6	16.3	22.2	1,305.3	10.6	40.7		
July		10,083.1	504.4	338.2	2,943.3	3,205.1	242.0	137.6	(12)	58.5	14.3	24.8	1,192.4	10.5	40.9		
August		10,165.9	508.6	340.6	2,950.1	3,229.9	242.8	138.7	(12)	68.5	13.4	31.1	1,170.6	10.0	74.1		
September		10,236.2	514.0	342.9	2,954.5	3,249.9	243.5	139.7	(12)	63.8	13.9	34.8	1,162.9	8.2	85.5		
October		10,303.1	518.2	345.3	2,962.9	3,273.0	243.9	140.7	(12)	65.5	15.3	33.0	1,111.9	4.1	96.0		
November		10,354.0	521.9	347.6	2,968.0	3,290.3	245.3	141.6	(12)	57.2	13.1	32.2	1,354.0	3.9	90.3		
Amount of benefits <sup>14</sup>																	
1940	\$1,183,462	\$17,150	\$114,166	\$62,019	\$317,851	\$6,371	\$1,448	\$105,696	\$11,833	\$12,267		\$518,700		\$15,961			
1941	1,079,648	51,169	119,912	64,933	320,561	23,644	1,559	111,799	13,270	13,943		344,321		14,537			
1942	1,124,351	76,147	122,806	68,115	325,265	39,523	1,603	111,193	15,005	14,342		344,084		6,268			
1943	911,696	92,943	125,795	72,961	331,350	55,152	1,704	116,133	17,843	17,255		79,643		917			
1944	1,104,638	113,487	129,707	77,193	456,279	73,451	1,765	144,302	22,034	19,238		62,385	\$4,215	582			
1945	2,047,025	148,107	137,140	83,874	697,830	99,651	1,772	254,238	26,127	23,431		445,866	126,630	2,359			
1946	5,135,413	222,320	149,188	94,585	1,268,984	127,933	1,817	333,640	27,851	30,610		1,094,850	1,743,718	39,917			
1947	4,658,540	287,554	177,053	106,876	1,676,029	149,179	19,283	382,515	29,460	33,115		\$11,368	776,165	970,542	39,401		
1948	4,454,705	352,022	208,642	132,852	1,711,182	171,837	36,011	\$918	413,912	32,315	32,140	30,843	793,265	510,167	28,599		
1949	5,613,168	437,420	240,893	158,973	1,692,215	196,586	39,257	4,317	477,406	33,158	31,771	30,103	1,737,279	430,194	103,596		
1950	5,196,761	651,409	254,240	175,787	1,732,208	276,945	43,884	8,409	491,579	32,740	33,578	28,099	1,373,426	34,653	59,804		
1951	5,503,855	1,321,061	268,733	196,529	1,647,938	306,803	49,527	14,014	519,398	57,337	33,356	26,297	840,411	2,234	20,217		
1952	6,285,237	1,539,327	361,200	225,120	1,722,225	591,504	74,085	19,986	572,983	63,298	37,251	34,689	998,237	3,539	41,793		
1953	7,353,396	2,175,311	374,112	269,300	1,840,437	743,536	83,319	27,325	613,475	87,451	43,377	45,150	962,221	41,698	46,684		
1954	9,455,374	2,697,982	428,900	298,126	1,921,380	879,952	93,201	32,530	628,801	92,229	41,480	49,173	2,026,866	107,666	157,088		
1955	10,275,552	3,747,742	438,970	335,876	2,057,515	1,107,541	121,847	39,362	688,426	112,871	42,233	51,945	1,350,268	87,672	93,284		
1956	11,193,067	4,361,231	490,445	400,647	2,101,798	1,244,073	133,171	49,675	699,204	109,304	41,895	49,538	1,380,726	60,917	70,443		
1957	13,560,263	5,744,490	538,501	474,841	2,180,509	1,520,749	143,826	58,265	748,660	138,785	47,278	51,292	1,766,445	53,087	93,535		
1958	17,512,022	6,722,871	570,741	561,988	2,382,215	1,720,146	153,947	74,185	794,253	132,908	56,043	51,920	3,979,946	82,035	228,824		
1958																	
November	1,348,892	555,238	47,300	50,256	201,244	142,291	12,765	7,211	66,765	10,168	4,791	4,449	227,723	2,693	16,030		
December	(12)	(11)	47,330	50,839	201,017	(11)	12,818	7,309	67,250	(11)	5,092	5,424	295,602	3,311	19,755		
1959																	
January	1,546,528	603,041	48,050	51,000	205,188	156,709	13,373	7,308	67,300	22,409	4,583	4,979	338,757	3,486	20,345		
February	1,501,047	610,445	48,532	51,421	198,109	158,212	13,553	7,444	67,582	12,643	5,441	3,517	307,403	2,993	13,752		
March	1,519,454	620,079	49,030	52,193	202,964	160,103	13,626	7,588	67,851	15,015	5,876	3,513	306,451	2,688	12,477		
April	1,484,747	628,174	49,518	52,415	206,796	162,046	13,783	7,643	68,519	14,955	6,627	3,203	259,950	2,019	9,099		
May	1,420,158	633,073	49,761	52,865	206,287	163,626	13,826	7,730	68,851	13,646	5,675	4,221	190,106	1,250	8,641		
June	1,425,035	640,167	55,192	53,520	207,191	165,378	15,345	7,798	68,800	13,676	6,173	7,153	162,326	1,114	21,202		
July	1,419,346	646,819	55,232	53,377	207,399	166,893	15,344	7,827	68,447	12,225	5,039	5,700	154,918	1,148	18,918		
August	1,425,819	653,399	55,529	54,071	206,062	168,648	14,435	7,945	68,229	14,422	5,073	7,418	142,284	990	27,314		
September	1,442,015	658,585	56,091	54,593	207,808	169,961	15,536	8,004	68,093	13,385	5,295	7,079	150,692	845	26,078		
October	1,445,507	663,819	56,382	54,888	209,245	171,498	15,579	8,083	68,520	13,781	5,656	6,596	145,249	401	25,810		
November	1,475,375	667,731	56,750	55,406	207,780	172,743	15,700	8,092	68,258	12,054	5,240	6,108	177,456	358	21,693		

<sup>1</sup> Under Social Security Act, (1) retirement benefits—old-age, wife's, and husband's benefits and benefits (partly estimated) to children of old-age beneficiaries (including those to disabled children aged 18 or over, beginning Jan. 1957) and (2) disability benefits—benefits to disabled workers aged 50–64 beginning July 1957 and, beginning Oct. 1958, to their dependent wives, husbands, and children (including disabled children aged 18 or over). Beginning Dec. 1951, includes spouse's annuities under Railroad Retirement Act.

<sup>2</sup> Data for civil-service retirement and disability fund; excludes noncontributory payments made under Panama Canal Construction Annuity Act. Through June 1948, retirement and disability benefits include payments to survivors under joint and survivor elections.

<sup>3</sup> Pensions and compensation, and subsistence payments to disabled veterans undergoing training.

<sup>4</sup> Mother's, widow's, widower's, parent's, and child's benefits; beginning Jan. 1957, includes payments (partly estimated) to deceased workers' disabled children aged 18 or over.

<sup>5</sup> Annuities to widows under joint and survivor elections and, beginning Feb. 1947, survivor benefits—widow's, widower's (first paid Dec. 1951), widowed mother's, parent's, and child's.

<sup>6</sup> Payments to veterans' widows, parents, and children; number, end of quarter.

<sup>7</sup> Number of decedents on whose account lump-sum payments were made.

<sup>8</sup> Under railroad retirement, Federal civil-service, and veterans' programs.

<sup>9</sup> Represents average number of beneficiaries in a 14-day registration period;

temporary disability benefits first payable July 1947.

<sup>10</sup> Represents average weekly number of beneficiaries; includes payments to unemployed Federal workers from Jan. 1955 and to unemployed ex-servicemen from Nov. 1958, made by the States as agents of the Federal Government. Includes temporary unemployment compensation programs, June 1958–July 1959.

<sup>11</sup> Beginning Sept. 1944, under Servicemen's Readjustment Act, readjustment allowances to unemployed and self-employed veterans of World War II. Beginning Nov. 1952, under Veterans' Readjustment Assistance Act, unemployment compensation benefits to veterans. Number represents average weekly claims paid.

<sup>12</sup> Not available.

<sup>13</sup> See footnote 5, table 4, page 33.

<sup>14</sup> Payments: under Social Security Act annual data represent Treasury disbursements and, under Railroad Retirement Act, amounts certified (for both programs monthly benefit data, by month, are for benefits in current-payment status); under Railroad Unemployment Insurance Act, amounts certified; for Veterans Administration programs, except readjustment allowance program, disbursements; under State unemployment insurance laws, Servicemen's Readjustment Act, and Veterans' Readjustment Assistance Act, checks issued; for civil-service programs, disbursements through June 1949 and authorizations from July 1949. Civil-service and railroad unemployment insurance data adjusted monthly; other data adjusted annually.

Source: Based on reports of administrative agencies.



Table 2.—Contributions and taxes collected under selected social insurance and related programs, by specified period, 1957-59

[In thousands]

Period	Retirement, disability, and survivor insurance				Unemployment insurance		
	Federal insurance contributions <sup>1</sup>		Federal civil-service contributions <sup>2</sup>	Railroad retirement insurance contributions	State unemployment insurance contributions <sup>3</sup>	Federal unemployment taxes <sup>4</sup>	Railroad unemployment insurance contributions <sup>4</sup>
	Retirement and survivor	Disability					
Fiscal year:							
1957-58 *	\$7,266,985	\$926,403	\$1,259,041	\$575,282	\$1,500,397	\$335,880	\$99,891
1958-59 *	7,565,086	894,995	1,515,852	525,360	1,675,286	324,020	102,014
5 months ended:							
November 1957	2,506,305	321,545	449,554	256,333	780,074	3,724	35,464
November 1958	2,885,123	359,135	640,334	221,401	751,279	3,978	34,850
November 1959	3,295,659	374,709	605,173	256,244	1,022,029	5,021	44,664
1958							
November	674,926	96,209	113,387	67,782	183,621	671	10,475
December	355,057	44,337	135,868	43,715	11,466	725	13,283
1959							
January	230,887	16,494	120,412	14,316	76,943	39,052	573
February	875,272	108,608	110,458	71,198	142,928	261,357	7,438
March	727,420	82,163	131,310	42,883	9,051	15,218	16,269
April	626,778	58,719	122,376	16,166	259,635	1,432	830
May	1,278,210	159,230	131,554	70,049	413,056	945	10,015
June *	586,339	66,308	123,540	45,641	10,928	701	18,756
July	208,757	53,757	109,093	20,148	245,078	743	1,017
August	1,251,509	137,055	125,141	85,432	370,076	575	9,433
September	595,180	58,729	129,659	51,849	14,563	2,337	22,947
October	245,584	33,793	129,137	16,448	135,262	664	757
November	904,629	101,374	112,143	82,366	257,110		10,510

<sup>1</sup> Represents contributions of employees, employers, and the self-employed in employments covered by old-age and survivors insurance and, beginning January 1957, by disability insurance; beginning January 1951, on an estimated basis, with suitable subsequent adjustments; beginning May 1951, includes deposits in the trust fund(s) by States under voluntary coverage agreements; beginning December 1952 (January 1959 for disability insurance), adjusted for employee-tax refunds; beginning 1959, includes transfers from the railroad retirement account to the disability insurance trust fund under the financial interchange provisions of the Railroad Retirement Act.

<sup>2</sup> Represents employee and employing agency (Government) contributions to the civil-service retirement and disability fund.

<sup>3</sup> Represents deposits in State clearing accounts of contributions plus penalties and interest collected from employers and, in 3 States, contributions from employees; excludes contributions collected for deposit in State temporary disability insurance funds. Data reported by State agencies.

<sup>4</sup> Represents taxes paid by employers under the Federal Unemployment Tax Act.

<sup>5</sup> Beginning 1947, also covers temporary disability insurance.

<sup>6</sup> Except for State unemployment insurance, as shown in the *Final Statement of Receipts and Expenditures of the U.S. Government*.

Source: *Monthly Statement of Receipts and Expenditures of the U.S. Government* and other Treasury reports, unless otherwise noted.

## RECENT PUBLICATIONS

(Continued from page 9)

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**NEW YORK STATE DIVISION OF HOUSING**. *How To Provide Housing Which the Elderly Can Afford*. New York: The Division, 1958. 35 pp. Processed.

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## Public Welfare

**ANDERSON, NELS**. *The Urban Community: A World Perspective*. New York: Henry Holt and Co., 1959. 500 pp. \$5.50. Includes chapters on urbanism and

population phenomena, the nature of the community, urbanism and the family, some economic aspects of urban living, and welfare in the modern community.

**KAUFMAN, MANUEL**. *The Social Service Exchange: A Professional Service*. Philadelphia: Newtown Conference, 311 S. Juniper St., 1959. 8 pp. Processed. 50 cents.

The role of the social service exchange in providing effective community services.

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**MCLEOD, DONNA L., and HYLTON, LYDIA F.** *An Evaluation of a Method for Administering In-Service Training in Aid to Dependent Children*. Ann Arbor: University of Michigan, School of Social Work, 1958. 97 pp. Processed.

Reports on the second year of a 2-year study designed to improve services to families receiving aid to dependent children by helping them

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"A report of an inter-agency project" (Continued on page 34)

Table 3.—Status of the old-age and survivors insurance and disability insurance trust funds, by specified period, 1937–59  
[In thousands]

Period	Receipts		Expenditures		Assets at end of period		
	Net contribution income and transfers <sup>1</sup>	Interest received <sup>2</sup>	Benefit payments <sup>3</sup>	Administrative expenses <sup>4</sup>	U.S. Government securities <sup>5</sup>	Cash balance	Total assets
Old-age and survivors insurance trust fund							
Cumulative, January 1937–November 1959 *...	\$66,745,545	\$5,632,096	\$50,473,846	\$1,569,470	\$19,163,905	\$1,170,420	\$20,334,325
Fiscal year:							
1957–58 *	7,266,985	557,274	7,874,932	165,604	21,764,189	1,048,411	22,812,600
1958–59 *	7,565,086	543,420	9,173,587	206,094	20,474,430	1,066,994	21,541,424
5 months ended:							
November 1957.....	2,596,305	53,648	3,137,451	69,496	21,621,070	850,814	22,471,884
November 1958.....	2,885,123	60,433	3,648,032	90,870	20,997,551	1,021,703	22,019,254
November 1959.....	3,295,659	53,046	4,457,934	97,870	19,163,905	1,170,420	20,334,325
1958							
November.....	674,926	9,530	698,756	16,482	20,997,551	1,021,703	22,019,254
December.....	355,057	214,020	703,598	20,310	20,953,408	911,014	21,864,422
1959							
January.....	230,887	1,980	751,454	16,709	20,395,900	933,226	21,329,126
February.....	875,272	15,934	790,721	17,388	20,280,440	1,131,783	21,412,224
March.....	727,420	17,686	812,432	6,586	20,411,558	926,753	21,338,310
April.....	626,778	22,445	816,871	17,645	20,116,208	1,036,749	21,153,017
May.....	1,278,210	10,835	826,599	17,332	20,539,768	1,058,362	21,598,130
June *.....	586,339	200,087	823,880	19,252	20,474,430	1,066,994	21,541,424
July.....	298,757	1,822	1,103,117	18,039	19,793,830	927,018	20,720,848
August.....	1,251,509	15,299	833,235	18,362	20,096,417	1,039,642	21,136,060
September.....	595,180	13,923	838,850	25,569	19,924,675	956,068	20,880,743
October.....	245,584	18,189	841,472	17,733	19,367,605	917,707	20,285,312
November.....	904,629	3,812	841,260	18,168	19,163,905	1,170,420	20,334,325
Disability insurance trust fund							
Cumulative, January 1957–November 1959 *...	\$2,533,307	\$53,155	\$720,434	\$36,204	\$1,745,558	\$84,266	\$1,829,824
Fiscal year:							
1957–58 *	926,403	15,843	168,420	12,112	1,054,458	44,515	1,098,973
1958–59 *	894,995	33,293	339,231	21,410	1,606,874	59,747	1,666,621
5 months ended:							
November 1957.....	321,545	621	42,364	1,230	567,991	47,839	615,830
November 1958.....	359,135	1,601	114,024	1,298	1,264,062	80,326	1,344,387
November 1959.....	374,709	2,655	212,783	1,377	1,745,558	84,266	1,829,824
1958							
November.....	96,209	554	27,021	545	1,264,062	80,326	1,344,387
December.....	44,337	13,523	23,189	545	1,320,758	57,756	1,378,514
1959							
January.....	16,494	102	32,793	738	1,316,678	44,901	1,361,578
February.....	108,608	794	31,096	246	1,359,353	80,285	1,439,638
March.....	82,163	—54	32,860	17,773	1,426,704	44,411	1,471,115
April.....	58,719	491	31,945	270	1,455,434	42,676	1,498,110
May.....	159,230	640	33,696	270	1,542,014	82,000	1,624,014
June *.....	66,308	16,196	39,628	270	1,606,874	59,747	1,666,621
July.....	53,757	94	42,299	280	1,629,234	48,659	1,677,893
August.....	137,055	855	41,539	280	1,698,111	75,872	1,773,983
September.....	58,729	262	40,607	280	1,741,661	50,427	1,792,088
October.....	23,793	616	44,016	268	1,725,458	46,755	1,772,213
November.....	101,374	829	44,323	268	1,745,558	84,266	1,829,824

<sup>1</sup> For July 1940 to December 1950 equals taxes collected; beginning January 1951, equals amounts appropriated (estimated tax collections with suitable subsequent adjustments). Beginning May 1951, includes deposits by States under voluntary coverage agreements. For 1947–51 includes amounts appropriated to meet costs of benefits payable to certain veterans' survivors. Beginning 1952 for the old-age and survivors insurance trust fund and January 1959 for the disability insurance trust fund, includes deductions for refund of estimated amount of employee-tax overpayment. Beginning 1959, includes transfers to the disability insurance trust fund from the railroad retirement account under the financial interchange provisions of the Railroad Retirement Act; the first such transfer (\$22 million) occurred July 1959.

<sup>2</sup> Includes interest transferred to the old-age and survivors insurance trust fund from the railroad retirement account under the financial interchange provisions and, beginning June 1958, from the disability insurance trust fund to the old-age and survivors insurance trust fund (see footnote 4).

<sup>3</sup> Includes transfer to the railroad retirement account from the old-age and survivors insurance trust fund under the financial interchange provisions—

\$124 million in July 1958 and \$282 million in July 1959. Disability insurance benefit payments began August 1957.

<sup>4</sup> Represents net expenditures for administration. Beginning November 1951, adjusted for reimbursement to trust fund of small amounts for sales of services. Beginning October 1953, includes expenses for central office building construction. Beginning January 1957, subject to subsequent adjustment (with interest) between the two trust funds; the first adjustment (\$9.1 million, applicable to fiscal year 1956–57) was transferred from the disability trust fund June 1958, and the second (\$17.5 million, applicable to fiscal year 1957–58) was transferred March 1959.

<sup>5</sup> Book value: Includes net unamortized premium and discount, accrued interest purchased, and repayments on account of accrued interest on bonds at the time of purchase.

<sup>6</sup> Revised to correspond with *Final Statement of Receipts and Expenditures of the U.S. Government*.

Source: *Monthly Statement of Receipts and Expenditures of the U.S. Government* and unpublished Treasury reports.

**Table 4.—Old-age, survivors, and disability insurance: Monthly benefits in current-payment status at the end of selected months, December 1948–November 1959, by type of benefit, and monthly benefits awarded, November 1959<sup>1</sup>**

[Amounts in thousands; data corrected to Dec. 23, 1959]

Item	Total			Old-age	Disability <sup>2</sup>	Wife's or husband's			Child's <sup>4</sup>			Widow's or wid- ower's	Moth- er's	Par- ent's	
	Total	OASI <sup>3</sup>	DI <sup>3</sup>			Total	OASI <sup>3</sup>	DI <sup>3</sup>	Total	OASI <sup>3</sup>	DI <sup>3</sup>				
	Number														
In current-payment status at end of month: December:															
1948.....	2,314,557	2,314,557	-----	1,047,985	-----	320,928	320,928	-----	581,265	581,265	-----	210,253	142,223	11,903	
1950.....	3,477,243	3,477,243	-----	1,770,984	-----	508,350	508,350	-----	699,703	699,703	-----	314,189	169,438	14,579	
1952.....	5,025,549	5,025,549	-----	2,643,932	-----	737,859	737,859	-----	938,751	938,751	-----	454,563	228,984	21,460	
1954.....	6,886,480	6,886,480	-----	3,775,134	-----	1,015,892	1,015,892	-----	1,160,770	1,160,770	-----	638,091	271,536	25,057	
1956.....	9,128,121	9,128,121	-----	5,112,430	-----	1,433,507	1,433,507	-----	1,340,995	1,340,995	-----	913,069	301,240	26,880	
1958.....															
November.....	12,430,234	12,162,177	268,057	6,920,677	237,719	2,031,091	2,018,860	12,231	1,624,135	1,606,028	18,107	1,232,583	353,964	30,065	
December <sup>5</sup> .....															
1959.....															
January.....	12,565,823	12,263,577	302,246	6,968,335	248,894	2,045,988	2,025,344	20,644	1,663,592	1,630,884	32,708	1,254,302	354,028	30,684	
February.....	12,674,727	12,359,615	315,112	7,026,854	254,701	2,063,391	2,039,655	23,736	1,676,635	1,639,960	36,675	1,267,444	354,689	31,013	
March.....	12,827,393	12,498,748	328,645	7,111,435	261,266	2,088,632	2,062,296	26,336	1,695,411	1,654,368	41,043	1,282,174	356,995	31,480	
April.....	12,967,396	12,629,974	337,422	7,187,142	265,858	2,110,941	2,083,136	27,805	1,714,849	1,671,090	43,759	1,296,422	360,250	31,934	
May.....	13,067,700	12,720,592	347,108	7,238,215	268,842	2,126,089	2,095,981	30,108	1,731,373	1,683,215	48,158	1,308,743	362,115	32,323	
June.....	13,181,380	12,820,164	361,216	7,295,640	275,164	2,141,761	2,108,534	33,227	1,747,656	1,694,831	52,825	1,321,979	366,498	32,682	
July.....	13,288,220	12,903,579	384,641	7,345,206	288,631	2,155,701	2,118,439	37,262	1,760,617	1,701,869	58,748	1,334,316	370,743	33,006	
August.....	13,395,770	12,995,845	399,925	7,399,152	297,611	2,169,313	2,129,492	39,821	1,774,396	1,711,903	62,493	1,347,802	374,119	33,377	
September.....	13,486,122	13,068,457	417,665	7,437,836	308,598	2,182,383	2,140,429	41,954	1,791,434	1,724,321	67,113	1,358,931	373,227	33,713	
October.....	13,576,095	13,143,808	432,287	7,476,908	317,888	2,194,307	2,150,548	43,759	1,808,125	1,737,485	70,640	1,370,848	374,041	33,978	
November.....	13,644,293	13,195,554	448,739	7,503,120	327,640	2,202,848	2,156,655	46,193	1,820,039	1,745,133	74,906	1,381,495	374,848	34,303	
Awarded, November 1959.....	164,506	137,662	26,844	64,818	16,177	28,394	24,034	4,360	30,118	23,811	6,307	17,442	7,005	552	
	Monthly amount														
In current-payment status at end of month: December:															
1948.....	\$45,872.5	\$45,872.5	-----	\$26,564.2	-----	\$4,307.3	\$4,307.3	-----	\$7,549.0	\$7,549.0	-----	\$4,331.0	\$2,958.6	\$162.2	
1950.....	126,856.5	126,856.5	-----	77,678.3	-----	11,994.9	11,994.9	-----	19,366.3	19,366.3	-----	11,481.3	5,800.8	534.9	
1952.....	205,179.0	205,179.0	-----	130,217.4	-----	19,178.4	19,178.4	-----	28,141.3	28,141.3	-----	18,482.2	8,272.7	887.0	
1954.....	339,342.0	339,342.0	-----	223,271.8	-----	32,270.6	32,270.6	-----	40,996.4	40,996.4	-----	29,525.7	12,088.9	1,188.6	
1956.....	482,592.9	482,592.9	-----	322,536.8	-----	48,325.6	48,325.6	-----	60,323.7	60,323.7	-----	45,780.0	14,262.2	1,364.8	
1958.....															
November.....	697,528.6	677,103.7	\$20,424.9	459,201.1	\$19,515.7	71,230.1	70,814.8	\$415.2	64,130.2	63,636.3	\$494.0	63,976.6	17,886.5	1,588.3	
December <sup>5</sup> .....															
1959.....															
January.....	759,750.1	736,167.1	23,583.0	497,547.3	21,876.1	77,097.1	76,355.1	742.0	71,832.6	70,867.7	964.9	69,977.3	19,671.5	1,748.2	
February.....	768,656.8	744,262.9	24,393.9	503,286.7	22,441.7	77,951.9	77,097.1	854.8	72,597.0	71,499.6	1,097.4	70,826.5	19,780.0	1,773.0	
March.....	780,181.2	754,952.8	25,228.4	510,893.7	23,044.9	79,065.0	78,116.5	948.5	73,569.0	72,334.0	1,235.0	71,778.4	20,022.1	1,808.2	
April.....	790,219.9	764,420.0	25,799.9	517,379.6	23,465.2	80,001.0	78,995.5	1,005.6	74,557.7	73,228.5	1,329.2	72,704.5	20,270.3	1,841.6	
May.....	797,299.4	771,009.7	26,289.7	521,731.1	23,740.0	80,628.9	79,544.1	1,084.8	75,386.2	73,921.3	1,464.9	73,504.5	20,438.2	1,870.5	
June.....	805,545.3	778,404.0	27,141.2	526,700.8	24,324.3	81,295.2	80,096.0	1,199.2	76,209.0	74,591.3	1,617.7	74,359.1	20,760.4	1,896.4	
July.....	813,712.0	785,002.7	28,709.3	531,230.1	25,563.2	81,901.0	80,557.8	1,343.2	76,861.8	75,058.9	1,802.9	75,151.8	21,084.1	1,920.1	
August.....	822,047.0	792,297.0	29,750.0	536,130.0	26,389.5	82,531.6	81,094.8	1,436.7	77,660.6	75,736.9	1,923.7	76,029.1	21,359.2	1,947.1	
September.....	828,546.2	797,564.1	30,982.1	539,497.9	27,397.8	83,089.9	81,575.5	1,514.4	78,526.3	76,456.5	2,069.8	76,760.9	21,302.4	1,971.0	
October.....	835,317.0	803,301.7	32,015.3	543,120.9	28,251.0	83,623.2	82,044.2	1,579.1	79,418.2	77,233.0	2,185.2	77,543.1	21,368.9	1,991.6	
November.....	840,474.2	807,355.8	33,118.4	545,561.8	29,135.4	83,998.8	82,333.7	1,665.2	80,061.3	77,743.4	2,317.8	78,248.5	21,453.1	2,015.2	
Awarded, November 1959.....	10,767.8	8,921.2	1,846.6	5,291.6	1,480.9	1,120.1	955.9	164.2	1,209.4	1,097.9	201.5	1,077.1	462.0	36.7	

<sup>1</sup> For an explanation of the treatment of dual entitlements, see the *Bulletin* for April 1957, p. 29, table 4, footnote 1.

<sup>2</sup> Benefits under the old-age and survivors insurance (OASI) parts of the old-age, survivors, and disability insurance program are payable from the old-age and survivors insurance trust fund to old-age insurance (retired-worker) beneficiaries and their dependents and to survivors of deceased workers. Benefits under the disability insurance (DI) part of the program are payable from the disability insurance trust fund to disability insurance (disabled-worker) beneficiaries and their dependents.

<sup>3</sup> Monthly benefits to disabled workers aged 50-64.

<sup>4</sup> Includes benefits payable to disabled persons aged 18 or over—dependent children of disabled, deceased, or retired workers—whose disability began before age 18.

<sup>5</sup> To effect the benefit increases provided by the 1958 amendments, certain operations affecting statistical data on monthly benefits and lump sums awarded and monthly benefits in current-payment status were suspended for December 1958; the figures on benefits in current-payment status at the end of December 1958 are therefore not available.



**Table 5.—Employment security: Selected data on nonfarm placements and unemployment insurance claims and benefits, by State, November 1959 <sup>1</sup>**

State	Nonfarm place- ments	Initial claims		Weeks of unemploy- ment covered by continued claims		Compensated unemployment <sup>2</sup>					Average weekly insured unemploy- ment <sup>3</sup>
		Total <sup>1</sup>	Women	Total	Women	All types of unemployment <sup>2</sup>			Total unemployment		
						Weeks compen- sated	Benefits paid <sup>4</sup>	Average weekly number of bene- ficiaries	Weeks compen- sated	Average weekly payment	
Total.....	6,465,011	1,501,495	417,331	6,702,896	2,197,684	5,398,227	\$168,343,752	1,285,292	4,968,813	\$32.21	1,677,044
Alabama.....	6,633	20,943	3,208	111,918	26,163	86,172	1,944,981	20,517	83,178	22.83	26,700
Alaska.....	632	3,463	393	13,421	2,252	11,698	418,860	2,785	11,137	36.29	3,269
Arizona.....	6,852	6,101	1,164	31,436	7,695	22,135	686,688	5,270	21,340	31.31	7,662
Arkansas.....	5,814	12,444	3,326	51,933	16,344	25,162	540,059	5,991	23,008	22.14	12,972
California.....	37,634	135,849	38,068	548,731	199,038	452,735	15,797,949	107,794	431,897	35.31	139,219
Colorado.....	7,405	7,001	1,222	26,841	6,896	20,280	720,694	4,829	18,819	36.49	6,457
Connecticut.....	7,785	19,694	7,744	97,545	46,546	88,761	2,918,508	21,134	84,451	33.68	24,214
Delaware.....	646	4,696	568	18,011	3,848	16,747	563,747	3,987	15,811	34.51	4,523
District of Columbia.....	4,056	3,100	756	15,953	5,714	12,551	323,783	2,988	12,163	26.02	3,954
Florida.....	17,373	17,494	4,442	86,450	33,707	55,697	1,418,295	13,261	52,325	26.08	22,678
Georgia.....	9,163	17,847	6,325	109,863	40,811	87,864	2,167,629	20,920	83,315	25.21	29,074
Hawaii.....	1,040	2,600	1,109	18,502	9,462	13,271	370,851	3,160	10,313	30.40	3,709
Idaho.....	3,267	5,561	701	17,156	4,049	11,969	404,891	2,850	11,332	34.22	4,778
Illinois.....	17,001	64,700	15,616	325,286	97,562	248,718	8,328,232	59,219	232,245	34.30	79,936
Indiana.....	6,722	41,767	8,380	167,038	42,262	104,136	3,104,536	24,794	96,110	30.90	36,714
Iowa.....	6,556	9,219	1,465	27,573	9,684	19,118	510,469	4,552	16,923	28.04	7,823
Kansas.....	5,922	11,074	1,552	44,225	12,210	40,937	1,376,104	9,747	39,072	34.13	12,058
Kentucky.....	4,065	16,800	3,016	102,718	26,193	62,955	1,738,169	14,989	57,838	28.68	26,225
Louisiana.....	6,079	15,172	1,737	82,594	13,213	64,861	1,930,783	15,443	60,527	30.56	21,283
Maine.....	1,446	9,699	4,204	48,254	26,536	37,761	766,147	8,991	34,391	20.52	11,856
Maryland.....	3,980	21,085	5,929	131,012	38,298	128,050	3,909,061	30,488	119,654	31.33	32,261
Massachusetts.....	12,763	59,820	30,517	219,511	107,334	185,902	5,196,551	44,262	147,416	31.23	56,773
Michigan.....	12,768	175,483	23,386	612,865	103,484	499,935	18,840,476	119,032	484,740	38.23	167,091
Minnesota.....	8,021	23,958	2,834	82,796	20,271	66,585	1,904,685	15,854	62,755	29.13	22,814
Mississippi.....	7,238	10,239	2,495	43,937	10,727	28,310	667,157	6,740	26,071	24.27	11,251
Missouri.....	6,304	38,740	11,220	146,258	44,650	100,771	2,614,663	23,993	85,080	28.19	37,402
Montana.....	2,935	9,247	1,294	33,585	8,158	29,411	839,149	7,003	29,411	28.45	8,542
Nebraska.....	5,023	3,844	735	10,586	5,466	8,753	233,936	2,084	8,188	27.62	2,929
Nevada.....	1,970	3,270	853	12,595	3,853	10,258	371,585	2,442	9,518	37.10	3,234
New Hampshire.....	1,253	3,787	1,827	17,894	10,245	13,818	326,543	3,290	11,713	25.57	4,356
New Jersey.....	9,715	56,712	24,852	295,985	148,873	283,448	8,933,976	67,488	246,313	32.75	75,064
New Mexico.....	3,698	3,968	475	17,733	2,848	13,881	389,535	3,305	13,076	28.69	4,720
New York.....	66,430	215,566	88,052	940,754	376,302	840,304	28,622,962	200,072	736,707	36.31	227,887
North Carolina.....	14,139	27,982	13,988	119,191	61,009	93,660	1,875,830	22,300	86,666	20.47	28,889
North Dakota.....	2,172	4,032	248	10,659	1,475	6,482	177,718	1,543	5,612	27.90	3,391
Ohio.....	19,549	90,562	15,645	384,873	88,435	280,943	10,761,123	66,891	269,541	37.83	96,017
Oklahoma.....	9,083	10,716	2,432	53,545	18,491	36,198	908,212	8,619	33,827	25.81	12,855
Oregon.....	4,696	17,674	3,477	58,400	17,300	37,733	1,272,888	8,984	34,736	34.49	15,469
Pennsylvania.....	19,412	125,984	37,965	699,314	219,295	574,747	16,344,191	136,845	530,001	29.56	169,327
Puerto Rico.....	3,828	1,046	285	8,168	3,040						
Rhode Island.....	1,940	9,962	5,356	40,054	19,511	33,895	966,680	8,070	30,449	29.90	9,830
South Carolina.....	5,978	7,675	2,693	41,922	19,498	31,499	678,797	7,500	29,108	22.05	10,612
South Dakota.....	1,716	2,418	186	4,983	1,111	2,684	68,903	639	2,333	27.15	1,377
Tennessee.....	8,718	18,422	5,172	110,850	41,204	89,841	1,924,623	21,391	82,909	21.97	27,823
Texas.....	46,653	38,308	7,583	194,551	54,660	151,905	3,680,633	36,096	144,359	24.66	44,511
Utah.....	3,165	4,440	896	19,512	5,457	14,518	472,374	3,457	13,867	33.00	4,824
Vermont.....	740	2,598	1,109	9,542	5,117	7,232	174,060	1,722	6,482	25.29	2,498
Virginia.....	6,166	12,090	3,275	49,770	16,256	35,028	810,863	8,340	33,361	23.70	12,340
Virgin Islands.....	244	0		4							
Washington.....	4,977	37,987	8,461	165,083	55,620	129,769	4,059,349	30,897	124,373	31.62	42,219
West Virginia.....	1,709	12,487	1,334	101,966	13,327	88,923	2,054,192	21,172	81,637	23.80	23,830
Wisconsin.....	10,497	24,276	7,489	113,507	44,313	85,465	3,046,188	20,349	78,020	36.41	29,157
Wyoming.....	1,397	1,893	302	6,043	1,871	5,051	185,474	1,203	4,695	37.46	1,545

<sup>1</sup> Excludes data for the Federal employees' unemployment compensation program, administered by the States as agents of the Federal Government; not comparable, therefore, with data previously published in the *Bulletin* for April 1955-June 1959.

<sup>2</sup> Excludes transitional claims.

<sup>3</sup> Total, part-total, and partial.

<sup>4</sup> Not adjusted for voided benefit checks and transfers under interstate combined-wage plan.

<sup>5</sup> Includes 43 placements made in Guam, not shown separately.

Source: Department of Labor, Bureau of Employment Security, and affiliated State agencies.

(Continued from page 31)

ect to provide family counseling as an alternative to placement in selected cases."

MARTMER, EDGAR E., editor. *The Child with a Handicap: A Team Approach to His Care and Guidance*. Springfield, Ill.: Charles C. Thom-

as, Publisher, 1959. 409 pp. \$11.

Papers by experts on the care of the handicapped child that summarize the role of the physician, parent, psychiatrist, social worker, teacher, and adoption agency; describe various types of handicaps; and present guides for parents and community

programs.

## Health and Medical Care

FOLLMANN, J. F., JR. *A Study of the Growth of Voluntary Health Insurance in Great Britain*. Chicago: Health Insurance Association of (Continued on page 37)

Table 6.—Public assistance in the United States, by month, November 1958–November 1959<sup>1</sup>

[Except for general assistance, includes vendor payments for medical care and cases receiving only such payments]

Year and month	Total <sup>2</sup>	Old-age assistance	Aid to dependent children		Aid to the blind	Aid to the permanently and totally disabled	General assistance (cases) <sup>4</sup>	Total	Old-age assistance	Aid to dependent children (recipients)	Aid to the blind	Aid to the permanently and totally disabled	General assistance (cases) <sup>4</sup>	
			Families	Recipients										
				Total <sup>3</sup>										Children
1958	Number of recipients							Percentage change from previous month						
November		2,454,340	746,271	2,811,134	2,154,928	109,796	325,294	393,000		-0.1	+0.7	+0.2	+0.7	+1.8
December		2,454,593	756,388	2,850,377	2,185,181	109,837	327,781	434,000		( <sup>5</sup> )	+1.4	( <sup>5</sup> )	+0.8	+10.5
1959														
January		2,448,033	763,380	2,878,505	2,206,932	109,707	329,479	471,000		-0.3	+1.0	-0.1	+0.5	+8.4
February		2,438,436	769,185	2,901,369	2,224,849	109,468	330,345	480,000		-0.4	+0.8	-0.2	+0.3	+2.0
March <sup>6</sup>		2,433,348	775,557	2,916,631	2,235,296	109,259	331,294	480,000		-0.1	+0.8	+0.1	+0.7	( <sup>7</sup> )
April <sup>6</sup>		2,431,092	781,132	2,940,172	2,253,313	109,542	335,134	450,000		-0.2	+0.5	( <sup>5</sup> )	+0.8	-6.3
May <sup>6</sup>		2,427,898	781,114	2,942,684	2,255,628	109,538	337,495	413,000		-0.1	( <sup>5</sup> )	( <sup>5</sup> )	+0.8	-8.2
June <sup>6</sup>		2,419,959	777,680	2,928,957	2,247,002	109,446	339,233	388,000		-0.3	-0.5	-0.1	+0.5	-6.1
July		2,413,982	772,268	2,911,173	2,233,710	109,444	341,367	370,000		-0.2	-0.6	( <sup>7</sup> )	+0.6	-4.6
August		2,407,947	771,194	2,910,722	2,235,360	109,326	342,629	340,000		-0.3	( <sup>7</sup> )	-0.1	+0.4	+2.8
September		2,404,320	771,976	2,917,570	2,241,834	109,294	344,492	313,000		-0.2	+0.2	( <sup>7</sup> )	+0.5	+3.3
October		2,401,156	771,464	2,918,093	2,243,846	109,146	346,841	463,000		-0.1	( <sup>5</sup> )	-0.1	+0.7	+2.6
November		2,397,992	773,088	2,926,346	2,251,366	109,066	348,150	412,000		-0.1	+0.3	-0.1	+0.4	+2.4
1958	Amount of assistance							Percentage change from previous month						
November	\$293,582,000	\$155,069,318	\$78,749,954		\$7,446,554	\$20,057,141	\$25,099,000	+0.3	-0.4	+1.3	+0.5	+0.5	+1.3	
December	303,277,000	157,340,068	80,630,305		7,500,736	20,513,094	29,893,000	+3.3	+1.5	+2.4	+0.7	+2.3	+19.1	
1959														
January	306,705,000	157,827,831	81,475,458		7,481,605	20,741,887	31,912,000	+1.1	+0.3	+1.0	-0.3	+1.1	+6.8	
February	308,057,000	156,529,222	82,692,290		7,467,038	20,902,565	32,557,000	+0.4	-0.8	+1.5	-0.2	+0.8	+2.0	
March <sup>6</sup>	310,668,000	156,566,456	83,648,244		7,523,686	21,091,117	33,203,000	+0.8	+0.1	+1.7	+1.1	+1.6	+2.0	
April <sup>6</sup>	309,448,000	156,834,423	84,509,504		7,512,199	21,240,340	30,772,000	-0.4	( <sup>7</sup> )	+0.2	-0.4	+0.2	-7.3	
May <sup>6</sup>	307,286,000	157,332,423	84,732,412		7,578,135	21,632,321	27,752,000	-0.7	+0.4	+0.5	+0.7	+2.0	-9.8	
June <sup>6</sup>	303,079,000	156,713,649	83,157,339		7,556,299	21,497,170	25,497,000	-1.4	-0.4	-1.7	-0.1	+0.2	-8.1	
July	299,894,000	155,564,036	82,665,228		7,563,790	21,587,468	24,673,000	-1.1	-0.7	-0.6	+0.1	+0.4	-3.2	
August	300,730,000	155,477,079	82,475,049		7,554,721	21,687,521	25,713,000	+0.3	-0.1	-0.2	-0.1	+0.5	+4.2	
September	304,716,000	155,912,366	83,451,511		7,541,482	21,946,373	27,344,000	+1.3	+0.3	+1.2	-0.2	+1.2	+6.3	
October	307,950,000	157,584,746	83,773,358		7,536,209	22,238,019	28,582,000	+1.1	+1.1	+0.4	-0.1	+1.3	+4.5	
November	308,284,000	157,090,005	83,996,705		7,522,311	22,161,489	28,741,000	+0.1	-0.3	+0.3	-0.2	-0.3	+0.6	

<sup>1</sup> For definition of terms see the *Bulletin*, October 1957, p. 18. All data subject to revision.

<sup>2</sup> Total exceeds sum of columns because of inclusion of vendor payments for medical care from general assistance funds and from special medical funds; data for such expenditures partly estimated for some States.

<sup>3</sup> Includes as recipients the children and 1 parent or other adult relative in families in which the requirements of at least 1 such adult were considered in determining the amount of assistance.

<sup>4</sup> Excludes Idaho; data not available.

<sup>5</sup> Increase of less than 0.05 percent.

<sup>6</sup> Except for general assistance, data included for Illinois understated for March, overstated for April, and partly estimated for May because of administrative change in the processing of payments. Percentage changes for the special types of public assistance based on data excluding Illinois.

<sup>7</sup> Decrease of less than 0.05 percent.

<sup>8</sup> Percentage changes for the special types of public assistance based on data excluding Illinois (data not comparable, see footnote 6).

## STATE PA LEGISLATION

(Continued from page 29)

A Kansas law was extended to provide for the licensing of all boarding homes and nursing homes for adults and homes for the aged offering care to three or more persons. Formerly, the law applied only to homes caring for public assistance recipients. Montana legislation provides for the

licensing of boarding or nursing homes that have two or more residents.

An Ohio law transfers the responsibility for licensing and regulating nursing and rest homes from the Department of Public Welfare to the Department of Health. It includes new provisions for classifying the homes, prohibiting placement in unlicensed homes by a public official,

and authorizing officials to act to enforce various provisions. Texas enacted legislation providing for the licensing of hospitals under the standard-setting authority of the State Health Department. The Nebraska Legislature directed that the Legislative Council carry on a study of nursing homes, and public hearings will be held before the 1961 legislative session.

Table 7.—Amount of vendor payments for medical care for recipients of public assistance, by program and State, November 1959<sup>1</sup>

State	Old-age assistance	Aid to dependent children	Aid to the blind	Aid to the permanently and totally disabled	General assistance
Total.....	\$22,223,086	\$4,668,301	\$572,336	\$3,548,912	\$8,772,000
Alabama.....	1,295	540		80	3
Alaska.....				( <sup>2</sup> )	24,060
Arkansas.....	298,516	20,431	10,040	45,099	
California.....	2,422,405	948,654	128,475	149,952	72,099
Colorado.....	786,344	37,372	2,562	16,010	81,187
Connecticut.....	256,542	150,188	9,358	59,561	( <sup>3</sup> )
Delaware.....			1,366		
District of Columbia.....	22,552	1,412	77	12,798	656
Florida.....	254,435	2,556	5,720	39,461	
Hawaii.....	11,253	24,608	546	8,662	
Idaho.....	31,569		357	2,300	
Illinois.....	2,274,166	520,295	67,543	407,842	794,454
Indiana.....	502,378	123,883	24,187	( <sup>2</sup> )	286,504
Iowa.....	231,961	64,790	8,729	( <sup>2</sup> )	224,697
Kansas.....	331,560	79,912	4,804	58,734	57,534
Louisiana.....	235,506	12,502	3,240	49,512	4,076
Maine.....	119,750	22,704	4,490	21,923	55,600
Maryland.....	50,253	82,398	1,261	17,599	
Massachusetts.....	3,348,874	205,482	5,336	558,086	155,693
Michigan.....	427,652	79,386	8,147	28,333	194,935
Minnesota.....	1,472,346	188,259	29,750	9,439	527,072
Montana.....	3,519	154	1,160	180	208,073
Nebraska.....	340,395	7,359	26,868	29,149	24,420
Nevada.....	15,732		1,110	( <sup>2</sup> )	87,722
New Hampshire.....	85,797	16,810	3,459	13,293	( <sup>3</sup> )
New Jersey.....	630,209	36,747	190	129,630	154,403
New Mexico.....	91,000	56,720	2,592	20,864	18,859
New York.....	2,476,635	1,021,755	97,851	1,055,453	197,050
North Carolina.....	107,895	58,588	9,073	63,176	201,586
North Dakota.....	227,103	25,361	1,081	37,999	21,200
Ohio.....	898,189				1,637,982
Oklahoma.....	455,000	7,593	374	53,766	( <sup>3</sup> )
Oregon.....	447,026	18,540	3,153	88,647	21,276
Pennsylvania.....	184,667	315,724	49,278	90,605	268,538
Rhode Island.....	95,802	75,392	920	40,785	58,725
South Carolina.....	34,251	11,953	1,518	12,766	9,514
South Dakota.....					109,623
Tennessee.....	16,874	21,778	852	1,686	
Utah.....	24,181		975	11,150	1,135
Virgin Islands.....	284	130	5	54	131
Virginia.....	112,947		4,190	32,395	10,744
Washington.....	1,364,382	169,035	18,708	206,168	97,162
West Virginia.....	59,356	79,257	2,634	18,507	7,812
Wisconsin.....	1,443,733	173,632	29,909	123,129	187,733
Wyoming.....	28,452	6,401	448	4,119	30,161

<sup>1</sup> For the special types of public assistance figures in italics represent payments made without Federal participation. For State programs not shown, no vendor payments were made during the month or such payments were not reported.

<sup>2</sup> Includes an estimated amount for States making vendor payments for medical care from general assistance funds and from special medical funds and reporting

these data semiannually but not on a monthly basis.

<sup>3</sup> No program for aid to the permanently and totally disabled.

<sup>4</sup> Includes payments made in behalf of recipients of the special types of public assistance.

<sup>5</sup> Data not available.

#### PA ADVISORY COUNCIL

(Continued from page 22)

years. The Social Security Act should be amended to authorize such a Council.

This Advisory Council is the first ever established by the Congress with examination of public assistance as its primary responsibility.

We believe that the total public assistance program should be reevaluated regularly.

In Recommendation 1 and the

statement of findings, we have called attention to the need for reappraisal of the present exclusions for eligibility under the federally-aided categories. The lack of uniformity of eligibility among the States (see findings for Recommendation 5) likewise calls for up-to-date periodic review. These problems are indicative of the kind that can and do arise and require periodic review and study. While these particular studies should not await the establishment of a future Advisory Council, we recom-

mend that the Congress provide for such a body.

Throughout our deliberations we have been keenly aware that it is difficult, if not impossible, to make even reasonably accurate predictions of conditions in our fluid, changing American economy. Any of the measures we propose, like other measures before them, may become dated. We consider that it is as essential for the total public assistance program to be reevaluated regularly, as it is to improve and strengthen it now.



Table 8.—Average payment per recipient for all assistance, for money payments, and for vendor payments for medical care, by program and State, November 1959<sup>1</sup>

State	Old-age assistance			Aid to dependent children (per recipient)			Aid to the blind			Aid to the permanently and totally disabled		
	All assist- ance <sup>2</sup>	Money pay- ments to recip- ients <sup>3</sup>	Vendor pay- ments for med- ical care <sup>3</sup>	All assist- ance <sup>2</sup>	Money pay- ments to recip- ients <sup>3</sup>	Vendor pay- ments for med- ical care <sup>3</sup>	All assist- ance <sup>2</sup>	Money pay- ments to recip- ients <sup>3</sup>	Vendor pay- ments for med- ical care <sup>3</sup>	All assist- ance <sup>2</sup>	Money pay- ments to recip- ients <sup>3</sup>	Vendor pay- ments for med- ical care <sup>3</sup>
All States.....	\$65.51	\$56.83	\$9.27	\$28.70	\$27.18	\$1.60	\$68.97	\$64.03	\$5.25	\$63.66	\$54.12	\$10.19
Alabama.....	48.03	48.02	.01	8.94	8.93	.01	37.49	37.49	-----	35.25	35.25	.01
Alaska.....	63.71	63.71	-----	32.63	32.63	-----	71.22	71.22	-----	( <sup>4</sup> )	( <sup>4</sup> )	( <sup>4</sup> )
Arizona.....	62.09	62.09	-----	29.89	29.89	-----	72.12	72.12	-----	( <sup>4</sup> )	( <sup>4</sup> )	( <sup>4</sup> )
Arkansas.....	48.31	43.00	5.33	15.59	14.81	.80	53.87	48.92	4.95	36.71	30.41	6.33
California.....	85.94	77.14	9.37	45.39	41.81	3.78	103.63	95.28	9.16	92.31	76.35	20.04
Colorado.....	97.72	82.46	15.26	33.08	31.70	1.38	77.68	68.94	8.74	67.86	64.99	2.86
Connecticut.....	111.97	94.28	17.68	47.51	41.23	6.28	117.68	86.28	31.40	134.57	93.54	41.03
Delaware.....	49.36	49.36	-----	19.68	19.68	-----	70.89	65.83	5.32	65.03	65.03	-----
District of Columbia.....	63.82	59.24	7.15	33.53	33.45	.08	68.97	68.64	.33	74.97	71.82	4.84
Florida.....	53.72	50.24	3.64	16.31	16.29	.03	58.85	56.73	2.24	60.30	56.15	4.56
Georgia.....	47.25	47.25	-----	23.75	23.75	-----	52.41	52.41	-----	51.91	51.91	-----
Guam.....	( <sup>4</sup> )	( <sup>4</sup> )	-----	10.22	10.22	-----	( <sup>4</sup> )	( <sup>4</sup> )	-----	( <sup>4</sup> )	( <sup>4</sup> )	-----
Hawaii.....	61.85	54.28	7.57	33.72	31.16	2.56	67.40	61.05	6.35	76.60	68.30	8.30
Idaho.....	66.07	61.83	4.27	40.55	40.55	-----	68.75	66.66	2.09	70.99	68.72	2.27
Illinois.....	73.48	46.32	29.87	39.25	35.70	3.61	81.98	61.42	22.00	81.62	60.22	22.88
Indiana.....	60.48	44.03	17.54	27.68	25.15	2.98	70.79	59.16	12.93	( <sup>4</sup> )	( <sup>4</sup> )	( <sup>4</sup> )
Iowa.....	73.35	67.97	6.57	35.85	34.54	2.02	88.18	83.16	6.06	( <sup>4</sup> )	( <sup>4</sup> )	( <sup>4</sup> )
Kansas.....	78.36	67.70	11.37	36.00	32.67	3.57	81.41	73.99	8.03	83.36	70.20	14.03
Kentucky.....	44.95	44.95	-----	20.20	20.20	-----	43.65	43.65	-----	44.14	44.14	-----
Louisiana.....	66.11	64.26	1.89	21.85	21.74	.13	75.60	74.60	1.22	53.88	50.86	3.14
Maine.....	63.80	53.81	10.00	27.30	26.17	1.13	68.48	58.48	10.00	69.71	58.71	11.00
Maryland.....	60.13	54.90	5.23	28.94	26.73	2.22	65.00	62.21	2.79	65.11	62.14	2.97
Massachusetts.....	100.72	60.24	41.32	45.75	41.68	4.34	113.28	112.01	2.47	117.91	66.49	55.48
Michigan.....	71.44	64.69	6.75	38.22	37.37	.85	76.89	72.34	4.55	85.75	79.38	6.38
Minnesota.....	84.27	54.63	30.90	44.17	39.05	5.67	99.30	74.02	27.24	61.16	58.11	4.11
Mississippi.....	29.81	29.81	-----	10.69	10.69	-----	38.43	38.43	-----	30.14	30.14	-----
Missouri.....	59.15	59.15	-----	23.94	23.94	-----	65.00	65.00	-----	61.12	61.12	-----
Montana.....	64.20	63.71	.50	33.21	33.18	.02	73.60	70.49	3.12	71.32	71.19	.13
Nebraska.....	60.42	47.85	22.02	29.56	28.91	.69	83.83	54.31	29.89	68.74	51.27	17.57
Nevada.....	69.97	64.00	5.96	27.01	27.01	-----	98.41	92.31	6.10	( <sup>4</sup> )	( <sup>4</sup> )	( <sup>4</sup> )
New Hampshire.....	77.51	60.42	17.09	41.14	36.88	4.27	81.67	67.25	14.41	91.81	59.78	32.03
New Jersey.....	88.78	61.43	33.21	45.59	44.99	.88	85.54	85.34	.20	94.18	76.30	20.59
New Mexico.....	67.57	59.02	8.56	30.23	28.17	2.07	63.62	56.89	6.73	65.93	57.09	8.84
New York.....	102.14	75.84	29.51	42.55	38.85	3.99	107.75	85.16	24.84	100.60	74.92	28.66
North Carolina.....	42.36	40.19	2.17	19.66	19.08	.58	53.80	52.08	1.78	46.82	43.34	3.48
North Dakota.....	86.59	58.45	31.07	38.50	35.52	3.82	72.51	65.03	10.70	93.71	63.23	34.05
Ohio.....	72.76	64.02	10.01	27.46	27.46	-----	57.97	57.97	-----	60.29	60.29	-----
Oklahoma.....	70.74	65.73	5.01	31.81	31.69	.13	83.52	83.32	.20	80.93	75.03	5.90
Oregon.....	76.67	52.94	23.71	38.43	37.87	.94	83.23	71.98	12.08	84.20	68.17	18.38
Pennsylvania.....	68.42	64.77	3.65	32.00	30.34	1.66	64.15	61.34	2.81	60.65	55.18	5.47
Puerto Rico.....	8.20	8.20	-----	3.97	3.97	-----	8.21	8.21	-----	8.74	8.74	-----
Rhode Island.....	76.93	62.98	14.00	35.83	31.08	4.75	78.52	70.52	8.00	82.62	67.62	15.00
South Carolina.....	38.77	37.75	1.03	14.31	13.99	.32	43.19	42.30	.89	41.97	40.32	1.66
South Dakota.....	60.18	60.18	-----	32.50	32.50	-----	60.77	60.77	-----	62.08	62.08	-----
Tennessee.....	41.48	41.18	.30	17.86	17.59	.27	46.47	46.17	.30	44.59	44.39	.20
Texas.....	53.03	53.03	-----	17.01	17.01	-----	58.06	58.06	-----	54.08	54.08	-----
Utah.....	65.85	62.86	3.00	33.73	33.73	-----	73.62	68.68	4.95	74.06	69.12	4.93
Vermont.....	57.60	57.60	-----	30.37	30.37	-----	61.54	61.54	-----	60.37	60.37	-----
Virgin Islands.....	23.45	22.98	.50	14.28	14.10	.17	( <sup>4</sup> )	( <sup>4</sup> )	( <sup>4</sup> )	25.64	25.14	.50
Virginia.....	43.05	37.55	7.50	20.63	20.63	-----	52.69	50.33	3.43	49.15	45.24	5.28
Washington.....	84.31	60.34	27.04	46.12	41.55	4.60	96.94	73.59	25.56	97.74	68.80	31.98
West Virginia.....	36.84	33.87	2.96	24.16	23.16	1.01	40.88	38.32	2.56	40.01	37.45	2.56
Wisconsin.....	79.36	42.38	39.72	44.88	40.77	5.28	83.21	55.07	29.97	102.69	42.01	63.63
Wyoming.....	69.90	61.50	8.40	36.58	34.23	2.35	71.03	64.44	6.59	70.50	62.74	7.76

<sup>1</sup> Averages for general assistance not computed because of difference among States in policy or practice regarding use of general assistance funds to pay medical bills for recipients of the special types of public assistance. Figures in italics represent payments made without Federal participation.  
<sup>2</sup> Averages based on cases receiving money payments, vendor payments for medical care, or both.

<sup>3</sup> May also include small amounts for assistance in kind and vendor payments for other than medical care. Averages based on number of cases receiving money payments.

<sup>4</sup> No program for aid to the permanently and totally disabled.

<sup>5</sup> A average payment not computed on base of fewer than 50 recipients.

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(Continued on page 39)

**Table 9.—Old-age assistance: Recipients and payments to recipients, by State, November 1959<sup>1</sup>**

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from—			
		Total amount	Average	October 1959 in—		November 1958 in—	
				Number	Amount	Number	Amount
Total <sup>2</sup>	2,397,992	\$157,090,005	\$65.51	-0.1	-0.3	-2.3	+1.3
Ala.	99,643	4,785,945	48.03	-2	( <sup>3</sup> )	-2.6	+7.0
Alaska	1,467	4,934,558	63.71	+5	+1.0	-1.9	+2.2
Ariz.	13,979	867,982	62.09	+2	+2	-6	+11.9
Ark.	55,980	2,704,198	48.31	( <sup>3</sup> )	( <sup>3</sup> )	-7	+1
Calif.	258,650	22,229,517	85.94	-1	( <sup>3</sup> )	-2.6	-8
Colo. <sup>4</sup>	51,530	5,035,499	97.72	-2	+5	-1.3	-
Conn.	14,507	1,624,318	111.97	-1	-2.8	-5.2	( <sup>3</sup> )
Del.	1,369	67,575	49.36	-1.2	-8	-10.1	-5.4
D. C.	3,155	201,339	63.82	-7	-1.1	+6	+5.9
Fla.	69,967	3,758,924	53.72	-1	+2	+2	+2.7
Ga.	97,852	4,623,171	47.25	( <sup>3</sup> )	-1	-6	-2.8
Guam	44	1,105	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )
Hawaii	1,487	91,967	61.85	+7	+1.1	-1.1	+11.0
Idaho	7,471	493,636	66.07	-5	+7	-4.5	-3.5
Ill.	76,125	5,593,589	73.48	-6	+5.2	-5.5	+2.7
Ind.	28,650	1,732,705	60.48	-3	+4	-6.7	-1.0
Iowa	35,302	2,589,440	73.35	-1	+7	-3.5	-3.4
Kans.	29,153	2,284,335	78.36	-1	( <sup>3</sup> )	-4.3	-2.9
Ky.	56,988	2,561,393	44.95	-2	-3	+2	+2.1
La.	124,759	8,248,244	66.11	-1	-1	+1	-8
Maine	11,975	764,000	63.80	+3	+2	-1.4	+7.8
Md.	9,612	577,940	60.13	-3	( <sup>3</sup> )	-1.7	+5.2
Mass.	81,039	8,162,170	100.72	-3	+6	-3.8	+11.9
Mich.	63,391	4,528,432	71.44	-2	-3	-5.0	-3.5
Minn.	47,647	4,015,090	84.27	-1	-4	-1.2	-1.9
Miss.	80,664	4,204,514	29.81	( <sup>3</sup> )	( <sup>3</sup> )	-1.0	-3
Mo.	118,256	6,995,075	59.15	-1	+2	-2.9	+1.6
Mont.	7,107	456,303	64.20	-5	+3	-7.9	-4.4
Nebr.	15,458	1,073,054	69.42	-1	( <sup>3</sup> )	-4.6	+1.7
Nev.	2,639	184,638	69.97	-1	+4	+6	+2.3
N. H.	5,020	389,100	77.51	-1	-1	-3.2	+4.3
N. J.	18,979	1,684,982	88.78	-1	+4	-1.9	+4.1
N. Mex.	10,637	718,780	67.57	+5	+5.0	+1.7	+9.5
N. Y.	83,934	8,573,153	102.14	-4	-1.5	-5.0	+8
N. C.	49,721	2,105,978	42.36	-3	+1	-2.0	+6.4
N. Dak.	7,310	632,962	86.59	( <sup>3</sup> )	+1.8	-3.6	+5.8
Ohio	89,722	6,528,215	72.76	+5	+6.8	-1.8	+10.5
Okl.	90,896	6,429,889	70.74	-2	-15.3	-1.9	-5.0
Oreg.	17,390	1,333,206	76.67	-1	-1.8	-4.3	-6.0
Pa.	50,559	3,459,356	68.42	-2	+2	+4.4	+38.7
P. R.	39,866	326,873	8.20	-1	-1	-1.9	-1.3
R. I.	6,843	526,436	76.93	-2	( <sup>3</sup> )	-4.8	-1
S. C.	33,323	1,292,010	38.77	-3	-1.2	-4.8	-3.3
S. Dak.	9,108	548,132	60.18	-6	-3	-5.1	+9.6
Tenn.	56,245	2,333,240	41.48	-4	-3	-1.2	-7.0
Tex.	222,865	11,817,922	53.03	( <sup>3</sup> )	+1	-8	+1.4
Utah	8,073	531,614	65.85	-3	-2.1	-5.6	-5.5
Vt.	5,781	332,987	57.60	-1	+1	-3.8	+8.3
V. I.	564	13,223	23.45	-7	-1.0	-7.1	+7.4
Va.	15,052	648,036	43.05	+1	+2.3	-3.3	+9.3
Wash.	50,464	4,254,735	84.31	-7	-1.5	-7.1	-12.3
W. Va.	20,038	738,116	36.84	-1	+9.7	-5.9	-2.8
Wis.	36,347	2,884,617	79.36	-1	+1.6	-3.8	+8.2
Wyo.	3,389	236,887	69.90	-9	-7	-6.2	-8.2

<sup>1</sup> For definition of terms see the *Bulletin*, October 1957, p. 18. All data subject to revision.

<sup>2</sup> Includes 3,789 recipients aged 60-64 in Colorado and payments of \$334,325 to these recipients. Such payments were made without Federal participation.

<sup>3</sup> Decrease of less than 0.05 percent.

<sup>4</sup> In addition, supplemental payments of \$8,501 from general assistance funds were made to 37 recipients.

<sup>5</sup> Increase of less than 0.05 percent.

<sup>6</sup> Average payment not computed on base of fewer than 50 recipients; percentage change, on fewer than 100 recipients.

<sup>7</sup> Program initiated July 1959 under the Social Security Act amendments of 1958.

**Table 10.—Aid to the blind: Recipients and payments to recipients, by State, November 1959<sup>1</sup>**

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from—			
		Total amount	Average	October 1959 in—		November 1958 in—	
				Number	Amount	Number	Amount
Total <sup>2</sup>	109,066	\$7,522,311	\$68.97	-0.1	-0.2	-0.7	+1.0
Ala.	1,630	61,114	37.49	-1.3	-1.6	-1.9	+6.3
Alaska	100	7,122	71.22	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )
Ariz.	537	60,362	72.12	+7	+8	+2.6	+13.6
Ark.	2,030	109,356	53.87	-1	+6	-4	+1.4
Calif. <sup>4</sup>	14,024	1,453,240	103.63	+2	+1	-4	-8
Colo.	238	22,761	77.68	-1.3	-1.8	-7.6	-6.3
Conn.	257	35,068	117.68	+1.0	+9.1	-6.9	+8.9
Del.	234	18,218	70.89	+8	+1	-5.9	-5.0
D. C.	234	16,138	68.97	+1.7	+1.2	-2.1	-1.7
Fla.	2,558	150,540	58.85	+6	+1.0	+4	+2.9
Ga.	3,548	185,949	52.41	-4	-3	+8	-6
Guam	2	42	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )
Hawaii	86	5,796	67.40	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )
Idaho	171	11,756	68.75	-2.8	-3.8	-3.4	-4.3
Ill.	3,070	251,692	81.98	-5	+3.5	-4.8	-8
Ind.	1,871	132,454	70.79	+2	-1.0	-2.8	+3.2
Iowa	1,440	126,980	88.18	-5	+8	-1.6	-2.2
Kans.	598	48,682	81.41	-2	+9	-4.9	-8.6
Ky.	2,982	130,173	43.65	-1.5	-1.6	-7.6	-8.4
La.	2,648	200,182	75.60	+3	0	+2.9	+1.9
Maine	449	30,748	68.48	0	( <sup>3</sup> )	-3.6	+3.3
Md.	452	29,381	65.00	-4	+4	-7	+5.2
Mass.	2,160	244,695	113.28	( <sup>3</sup> )	-3.7	+3.6	+6.8
Mich.	1,789	137,562	76.89	+7	+6	-1.8	+8
Minn.	1,092	108,434	99.30	-4	+2	-3.3	-5.2
Miss.	6,320	243,222	38.43	+7	+6	+10.1	+9.6
Mo. <sup>5</sup>	5,196	337,740	65.00	( <sup>3</sup> )	( <sup>3</sup> )	-7	+7.6
Mont.	372	27,381	73.60	-5	+3.0	-4.6	-7
Nebr.	899	75,366	83.83	-1.3	-1	-6.8	-3.4
Nev.	182	17,911	98.41	+2.2	+4.4	+11.7	+11.0
N. H.	240	19,600	81.67	-8	-1.4	-2.4	+6.9
N. J.	936	80,068	85.54	+6	+1.2	+1.1	+8.6
N. Mex.	385	24,495	63.62	+3	( <sup>3</sup> )	+3	+5.9
N. Y.	3,939	424,425	107.75	-7	-1.2	-4.3	+3
N. C.	5,096	274,154	53.80	-2	+1.5	+2.3	+13.9
N. Dak.	101	7,324	72.51	+1.0	+1.3	-2.9	+7.3
Ohio	3,609	209,226	57.97	-6	-11.6	-3.3	-12.1
Okl.	1,884	157,350	83.52	+3	+2	-1	-7.0
Oreg.	261	21,723	83.23	-1.9	+1.6	-10.3	-10.4
Pa. <sup>6</sup>	17,551	1,125,943	64.15	-2	( <sup>3</sup> )	-1.2	+1.0
P. R.	1,882	15,455	8.21	-1.0	+1.3	+4.0	+6.2
R. I.	115	9,030	78.52	-3.4	+1.2	-11.5	-1.7
S. C.	1,709	73,815	43.19	+2	+2	-3.8	-1.8
S. Dak.	166	10,088	60.77	+1.2	+3	-8.8	+5.7
Tenn.	2,839	131,920	46.47	-6	-7	-1.3	-3.8
Tex.	6,357	369,074	58.06	+4	+4	-6	+3.0
Utah	197	14,504	73.62	-1.5	+5.4	-6.2	-3
Vt.	136	8,369	61.54	+7	+1.8	-5.6	+12.1
V. I.	19	496	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )
Va.	1,220	64,283	52.69	-4	-5	+1.4	+18.3
Wash.	732	70,957	96.94	0	( <sup>3</sup> )	-3.3	-5.3
W. Va.	1,029	42,069	40.88	-7	+8.5	-5.2	-5.7
Wis.	998	83,048	83.21	-2	+3.2	-3.7	+8.8
Wyo.	68	4,830	71.03	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )	( <sup>3</sup> )

<sup>1</sup> For definition of terms see the *Bulletin*, October 1957, p. 18. All data subject to revision.

<sup>2</sup> Data include recipients of payments made without Federal participation and payments to these recipients as follows: California, \$33,654 to 299 recipients; Missouri, \$49,752 to 757 recipients; and Pennsylvania, \$698,924 to 11,158 recipients.

<sup>3</sup> Average payment not computed on base of fewer than 50 recipients; percentage change, on fewer than 100 recipients.

<sup>4</sup> Program initiated July 1959 under the Social Security Act amendments of 1958.

<sup>5</sup> Increase of less than 0.05 percent.

<sup>6</sup> Decrease of less than 0.05 percent.

Table 11.—Aid to dependent children: Recipients and payments to recipients, by State, November 1959<sup>1</sup>

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of families	Number of recipients		Payments to recipients			Percentage change from—			
		Total <sup>2</sup>	Children	Total amount	Average per—		October 1959 in—		November 1958 in—	
					Family	Recipient	Number of recipients	Amount	Number of recipients	Amount
Total	773,088	2,926,346	2,251,366	\$83,996,705	\$108.65	\$28.70	+0.3	+0.3	+4.1	+6.7
Alabama	21,510	85,811	67,007	766,724	35.65	8.94	— .8	— .8	— 5.0	+20.9
Alaska	1,136	3,865	2,899	126,108	111.01	32.63	+2.4	+3.5	— 1.9	+11.5
Arizona	6,967	27,516	21,234	822,490	118.06	29.89	+1.4	+1.0	+14.8	+30.4
Arkansas	6,815	25,630	20,060	399,699	58.65	15.59	+1.7	+2.4	— 9.7	— 9.6
California	70,740	251,164	196,114	11,399,842	161.15	45.39	+ .5	+ .4	+6.0	+5.2
Colorado	6,976	27,092	21,156	893,300	128.05	33.08	+ .3	+1.0	+1.5	+4.8
Connecticut	7,198	23,933	17,838	1,136,970	157.96	47.51	+2.4	— .4	+6.0	+3.3
Delaware	1,621	6,179	4,776	121,628	75.03	19.68	+ .8	+1.3	+ .5	— 14.5
District of Columbia	3,992	17,652	13,942	591,885	148.27	33.53	+1.3	+1.6	+18.0	+18.6
Florida	27,092	99,435	77,294	1,621,874	59.87	16.31	— 1.1	— 1.0	+2.9	+2.9
Georgia	15,187	56,253	43,400	1,335,953	87.97	23.75	+1.2	+1.1	— 5.6	— 6.4
Guam	78	536	464	5,479	70.24	10.22	+18.6	+4.4	( <sup>3</sup> )	( <sup>3</sup> )
Hawaii	2,456	9,599	7,628	323,702	131.80	33.72	+ .8	( <sup>3</sup> )	— 1.8	+1.8
Idaho	1,935	7,127	5,252	289,006	149.36	40.55	+ .8	+1.1	+2.9	+4.1
Illinois	35,040	143,950	110,921	5,650,208	161.25	39.25	— .8	+ .2	+7.3	+0.7
Indiana	11,390	41,523	31,260	1,149,327	100.91	27.68	+ .4	+1.0	+2.1	+ .6
Iowa	8,687	32,035	24,174	1,148,608	132.22	35.85	( <sup>3</sup> )	— .5	+4.8	+7.7
Kansas	5,913	22,375	17,541	805,484	136.22	36.00	+1.1	+ .7	+8.2	+9.7
Kentucky	20,308	72,661	54,558	1,467,724	72.27	20.20	— .6	— .5	— 1.6	— 1.4
Louisiana	24,122	98,527	76,399	2,152,340	89.23	21.85	( <sup>3</sup> )	+ .3	— .7	— 1.4
Maine	5,676	20,011	14,763	546,339	96.25	27.30	+ .9	+ .8	+6.6	+9.5
Maryland	8,974	37,185	29,099	1,076,276	119.93	28.94	+ .8	+1.3	+17.0	+25.8
Massachusetts	14,090	47,392	35,533	2,168,373	153.89	45.75	( <sup>3</sup> )	+1.7	+1.6	+ .2
Michigan	26,371	93,415	68,493	3,570,097	135.38	38.22	— .4	— .5	+2.2	+7.6
Minnesota	9,661	33,209	25,888	1,466,881	151.84	44.17	+ .5	+2.0	+7.1	+9.5
Mississippi	19,146	74,291	58,336	793,865	41.46	10.69	+ .1	+ .1	+12.9	+13.9
Missouri	25,767	97,866	74,174	2,342,503	90.91	23.94	+ .2	+ .1	+4.6	+12.9
Montana	1,855	6,911	5,423	229,495	123.72	33.21	+1.4	+1.4	— 5.2	— 2.8
Nebraska	2,788	10,668	8,178	315,319	113.10	29.56	+1.3	— .1	— .2	+8.3
Nevada	1,051	3,502	2,710	94,591	90.00	27.01	+1.5	+2.2	+12.8	+12.0
New Hampshire	1,040	3,940	2,970	162,100	155.87	41.14	— .3	— .3	— .8	— .8
New Jersey	12,345	41,985	31,913	1,913,987	155.04	45.69	+4.6	+4.7	+29.3	+36.1
New Mexico	7,164	27,461	21,090	830,164	115.88	30.23	+ .1	+ .3	+3.6	+4.9
New York	65,037	255,847	193,156	10,885,297	167.37	42.55	— .2	— 1.1	— .7	+2.0
North Carolina	25,569	101,014	77,893	1,985,833	77.67	19.66	+ .5	+ .5	+2.9	+8.4
North Dakota	1,773	6,631	5,161	255,294	143.99	38.50	+2.4	+ .8	+4.7	+4.4
Ohio	24,547	96,353	73,933	2,645,548	107.77	27.46	+ .3	— 5.2	+7.2	+6.1
Oklahoma	17,266	60,577	45,971	1,927,105	111.61	31.81	+ .2	+ .6	+4.3	+11.8
Oregon	5,443	19,660	14,874	755,116	138.73	38.43	+ .6	— .1	— .6	— 1.3
Pennsylvania	48,411	190,349	144,613	6,091,038	125.82	32.00	+1.2	+1.4	+18.7	+26.7
Puerto Rico	54,543	205,020	164,622	814,276	14.93	3.97	+1.2	+ .7	+13.4	+21.0
Rhode Island	4,373	15,872	11,949	568,732	130.06	35.83	+ .2	— .3	— .6	+1.3
South Carolina	9,413	37,581	29,617	537,707	57.12	14.31	+ .4	— .2	— 1.4	+ .5
South Dakota	3,062	10,571	7,965	343,606	112.22	32.50	0	+12.8	— .3	+17.6
Tennessee	21,778	80,429	60,668	1,436,350	65.95	17.86	— .3	— .2	+5.0	— 2.3
Texas	21,730	90,334	68,956	1,536,992	70.73	17.01	— 2.3	— 2.3	— 12.9	— 10.4
Utah	3,445	12,341	9,229	416,286	120.84	33.73	+ .9	— .7	+3.5	— 4.3
Vermont	1,229	4,423	3,329	134,325	109.30	30.37	+ .3	+ .3	+9.4	+24.6
Virgin Islands	217	749	623	10,694	49.28	14.28	— 3.7	+12.2	— 5.5	+39.4
Virginia	9,166	36,807	28,982	750,434	82.85	20.63	+1.3	+1.4	— .6	+8.7
Washington	10,880	36,730	28,754	1,693,963	155.70	46.12	+ .1	+ .2	— 10.2	— 8.4
West Virginia	20,354	78,853	61,454	1,905,454	93.62	24.16	+ .7	+7.3	+2.1	+5.2
Wisconsin	9,009	32,887	25,024	1,475,845	163.82	44.88	+ .2	— .9	+3.0	+3.5
Wyoming	752	2,719	2,076	99,460	132.27	36.58	+1.5	+2.3	+8.4	+5.5

<sup>1</sup> For definition of terms see the *Bulletin*, October 1957, p. 18. All data subject to revision.<sup>2</sup> Includes as recipients the children and 1 parent or other adult relative in families in which the requirements of at least 1 such adult were considered in determining the amount of assistance.<sup>3</sup> Program initiated July 1959 under the Social Security Act amendments of 1958.<sup>4</sup> Increase of less than 0.05 percent.<sup>5</sup> Decrease of less than 0.05 percent.

(Continued from page 37)

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Table 12.—Aid to the permanently and totally disabled: Recipients and payments to recipients, by State, November 1959<sup>1</sup>

[Includes vendor payments for medical care and cases receiving only such payments]

State	Number of recipients	Payments to recipients		Percentage change from—			
		Total amount	Average	October 1959 in—		November 1958 in—	
				Number	Amount	Number	Amount
Total.....	348,150	\$22,161,489	\$63.66	+0.4	-0.3	+7.0	+10.5
Ala.....	12,395	436,981	35.25	-9	-7	-3.7	+4.6
Ark.....	7,129	261,671	36.71	+7	+1.7	+1.3	+5.3
Calif.....	7,483	690,744	92.31	+1.9	+3.0	+59.7	+92.9
Colo.....	5,589	379,267	67.86	+2	+2.1	+2.9	+15.0
Conn.....	2,183	293,764	134.57	-6	+2.7	+2.3	+8.6
Del.....	376	24,450	65.03	+4.2	+3.0	+20.1	+22.5
D. C.....	2,646	195,376	74.97	-9	+1.1	+7.8	+13.2
Fla.....	8,636	521,989	60.30	+6	+1.4	+25.5	+33.6
Ga.....	20,161	1,046,545	51.91	+1.3	+1.2	+20.9	+21.1
Gnam.....	35	822	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )
Hawaii.....	1,044	79,968	76.60	-9	( <sup>2</sup> )	-2.5	+11.5
Idaho.....	1,014	71,984	70.99	+5	+1.5	+8.2	+9.7
Ill.....	17,825	1,454,888	81.62	-3	+3.2	-2.4	-4.1
Kans.....	4,185	348,879	83.36	+5	+1.1	-0.1	+1.8
Ky.....	7,856	346,783	44.14	-8	-8	+1.6	+1.8
La.....	15,761	849,249	53.88	+6	+7	+2.5	+2.7
Maine.....	1,993	138,924	69.71	+1.1	+1.1	+24.1	+32.5
Md.....	5,926	385,852	65.11	+3	+3	+8.9	+10.8
Mass.....	10,060	1,186,217	117.91	+4	+2.1	+4.3	+19.3
Mich.....	4,444	381,086	85.75	+9	+1.2	+16.3	+17.3
Minn.....	2,294	140,306	61.16	+1.6	+1.1	+12.2	+12.1
Miss.....	10,222	308,113	30.14	+3.3	+3.3	+51.2	+53.9
Mo.....	15,580	952,314	61.12	( <sup>2</sup> )	+2	+2.7	+7.9
Mont.....	1,422	101,411	71.32	+9	+1.3	-5.1	-1.5
Nebr.....	1,659	114,047	68.74	+3.2	+2.7	+10.2	+7.6
N. H.....	415	38,100	91.81	+5	+5	+16.2	+23.7
N. J.....	6,295	592,832	94.18	+5	+6	+12.8	+15.2
N. Mex.....	2,359	155,535	65.93	+1.1	+1.2	+10.4	+11.6
N. Y.....	36,821	3,704,226	100.60	-7	-2.2	-6.0	+1
N. C.....	18,154	849,893	46.82	+3	-4.4	+7.5	+11.6
N. Dak.....	1,116	104,576	93.71	+3	-3.7	+7.9	+16.4
Ohio.....	11,304	681,525	60.29	+6	-12.5	+12.7	+3.9
Okla.....	9,111	737,350	80.93	+2	-12.4	+4.7	+4.0
Oreg.....	4,824	406,175	84.20	-6	-3.4	+2.1	+1.5
Pa.....	16,562	1,004,417	60.65	+4	+7	+7.4	+9.7
P. R.....	22,103	193,090	8.74	-2	+5	+3.7	+4.0
R. I.....	2,719	224,657	82.62	-2	+1	+8.8	+13.3
S. C.....	7,701	323,238	41.97	-1	+11.7	-1.0	+19.0
S. Dak.....	1,111	68,975	62.08	-4	-1.4	+7.8	+28.1
Tenn.....	8,429	375,832	44.59	+1.1	+1.3	+25.2	+27.6
Tex.....	5,688	307,629	54.08	+1.3	+1.2	+39.0	+45.1
Utah.....	2,261	167,439	74.06	+8	+1.1	+12.0	+18.0
Vt.....	855	51,614	60.37	+7	+1.2	+14.3	+29.0
V. I.....	107	2,744	25.64	0	+1	+1.9	+15.7
Va.....	6,131	301,317	49.15	+1	+1.6	+4.4	+17.9
Wash.....	6,447	630,161	97.74	+7	-2	+6.7	+4.4
W. Va.....	7,233	289,405	40.01	-3	+9.5	-4.4	-1.0
Wis.....	1,935	198,696	102.69	+16.4	+10.5	+51.6	+60.9
Wyo.....	531	37,433	70.50	-4	+2.3	+4.5	+3.7

<sup>1</sup> For definition of terms see the *Bulletin*, October 1957, p. 18. All data subject to revision.

<sup>2</sup> Average payment not computed on base of fewer than 50 recipients; percentage change, on fewer than 100 recipients.

<sup>3</sup> Program initiated July 1959 under the Social Security Act amendments of 1958.

<sup>4</sup> Decrease of less than 0.05 percent.

Table 13.—General assistance: Cases and payments to cases, by State, November 1959<sup>1</sup>

[Excludes vendor payments for medical care and cases receiving only such payments]

State	Number of cases	Payments to cases		Percentage change from—			
		Total amount	Average	October 1959 in—		November 1958 in—	
				Number	Amount	Number	Amount
Total.....	412,000	\$28,741,000	\$69.70	+2.4	+0.6	+5.0	+14.5
Ala.....	93	1,170	12.58	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )
Alaska.....	198	13,957	70.49	+3.7	+9.0	-3.4	+6.0
Ariz.....	3,093	143,164	46.29	+8	+1.8	+14.7	+24.6
Ark.....	320	4,863	15.20	+19.4	+23.6	-19.0	-5.0
Calif.....	33,034	1,915,986	58.00	-1	-1.7	-1.8	+3.1
Colo.....	1,283	54,664	42.61	+10.3	+3.8	-21.2	-16.9
Conn.....	4,278	313,778	73.35	-5	-1.3	-21.7	-19.9
Del.....	1,608	101,840	63.33	+4.3	+6.4	-8.0	-5.8
D. C.....	1,394	102,033	73.19	-4	+1	+13.3	+14.7
Fla.....	8,700	293,000	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )
Ga.....	2,094	54,750	26.15	-1.6	+5.3	-1.5	+2.5
Guam.....	2	88	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )
Hawaii.....	1,144	83,162	72.69	-5	+1.7	-8.1	-1.4
Ill.....	45,720	4,129,334	90.32	-1.8	-3.7	+20.8	+37.5
Ind. <sup>3</sup> .....	26,938	1,023,876	38.01	+5.3	+5	+8.1	+17.8
Iowa.....	4,009	147,578	36.81	+9.4	+10.4	+9.0	+14.7
Kans.....	2,068	134,115	64.85	-6	+2.0	+3.2	+11.6
Ky.....	2,011	63,075	31.36	-2.7	+1.7	-26.0	-38.0
La.....	8,670	424,164	48.92	-1.5	-2.0	-14.9	-12.9
Maine.....	2,417	92,545	38.29	+9.0	+9.4	-10.5	-12.1
Md.....	2,807	178,635	63.64	+2.4	+3.4	+13.6	+21.9
Mass.....	7,877	544,555	69.13	-2.5	-3.4	-10.0	-9.6
Mich.....	33,753	3,292,357	97.54	+4.1	+2.9	-20.7	-14.9
Minn.....	11,213	883,114	78.76	+11.4	-3.1	+52.7	+75.7
Miss.....	1,102	16,764	15.21	-8	+3.0	+18.2	+23.1
Mo.....	8,371	494,520	59.08	+8	+1.1	+11.4	+3.1
Mont.....	3,047	203,105	66.66	+6.8	+8.5	+192.1	+338.0
Nebr.....	1,075	52,538	48.87	-3.2	+4.7	-10.6	-6.6
Nev.....	266	9,031	33.95	+9.0	+5.3	( <sup>2</sup> )	( <sup>2</sup> )
N. H.....	798	38,353	48.06	+3.5	+9.5	-27.5	-30.4
N. J. <sup>4</sup> .....	9,097	906,485	99.65	-1.6	-4.0	-13.6	-11.7
N. Mex.....	526	22,955	43.64	-5.4	-2.9	+1.5	+16.2
N. Y.....	34,788	3,232,464	92.97	+1.2	+1.1	-1.4	+1.1
N. C.....	1,860	45,156	24.28	+5.4	+7.0	-14.6	-16.1
N. Dak.....	478	24,429	51.11	+41.0	+40.8	+14.1	+16.8
Ohio.....	41,001	2,771,947	67.61	+9	-4.5	+14.0	+17.4
Okla.....	7,065	99,580	14.09	-1.7	-3.2	-3.7	+1.0
Oreg.....	2,380	129,013	54.21	-8.4	-7.0	-42.7	-49.8
Pa.....	54,308	4,860,334	89.50	+4.5	+3.8	+82.4	+135.9
P. R.....	1,482	10,153	6.85	+30.5	-1.7	-12.5	-11.4
R. I.....	2,831	195,380	69.01	-3.0	-6.4	-18.0	-17.9
S. C.....	1,316	40,010	30.40	+5.0	+36.8	+2.1	+30.3
S. Dak.....	322	9,795	30.42	-7.5	-5.8	-64.0	-69.0
Tenn.....	1,829	29,058	15.89	-2.7	-1.5	-20.1	-25.5
Tex. <sup>5</sup> .....	9,000	242,000	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )
Utah.....	2,166	161,972	74.78	+11.5	+16.6	+12.2	+28.9
Vt. <sup>6</sup> .....	1,250	53,000	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )	( <sup>2</sup> )
V. I.....	100	2,344	23.44	-5.7	-5.4	-17.4	-5.6
Va.....	2,011	78,423	39.00	+7.3	+6.2	+6.7	+13.1
Wash.....	10,927	764,559	69.97	+21.9	+18.4	-24.9	-24.7
W. Va.....	2,403	77,169	32.11	-9	-2.3	-14.1	-17.4
Wis.....	7,415	599,003	80.78	+5.6	+8.1	-25.9	-31.9
Wyo.....	449	26,531	59.09	+26.8	+28.8	-6.7	-6.7

<sup>1</sup> For definition of terms see the *Bulletin*, October 1957, p. 18. All data subject to revision.

<sup>2</sup> Partly estimated; does not represent sum of State figures because total excludes for Indiana and New Jersey an estimated number of cases receiving medical care, hospitalization, and burial only, and payments for these services. Excludes Idaho; data not available.

<sup>3</sup> Average payment not computed on base of fewer than 50 cases; percentage change, on fewer than 100 cases.

<sup>4</sup> About 5 percent of this total is estimated.

<sup>5</sup> Partly estimated.

<sup>6</sup> Program initiated July 1959.

<sup>7</sup> Includes an unknown number of cases receiving medical care, hospitalization, and burial only, and total payments for these services.

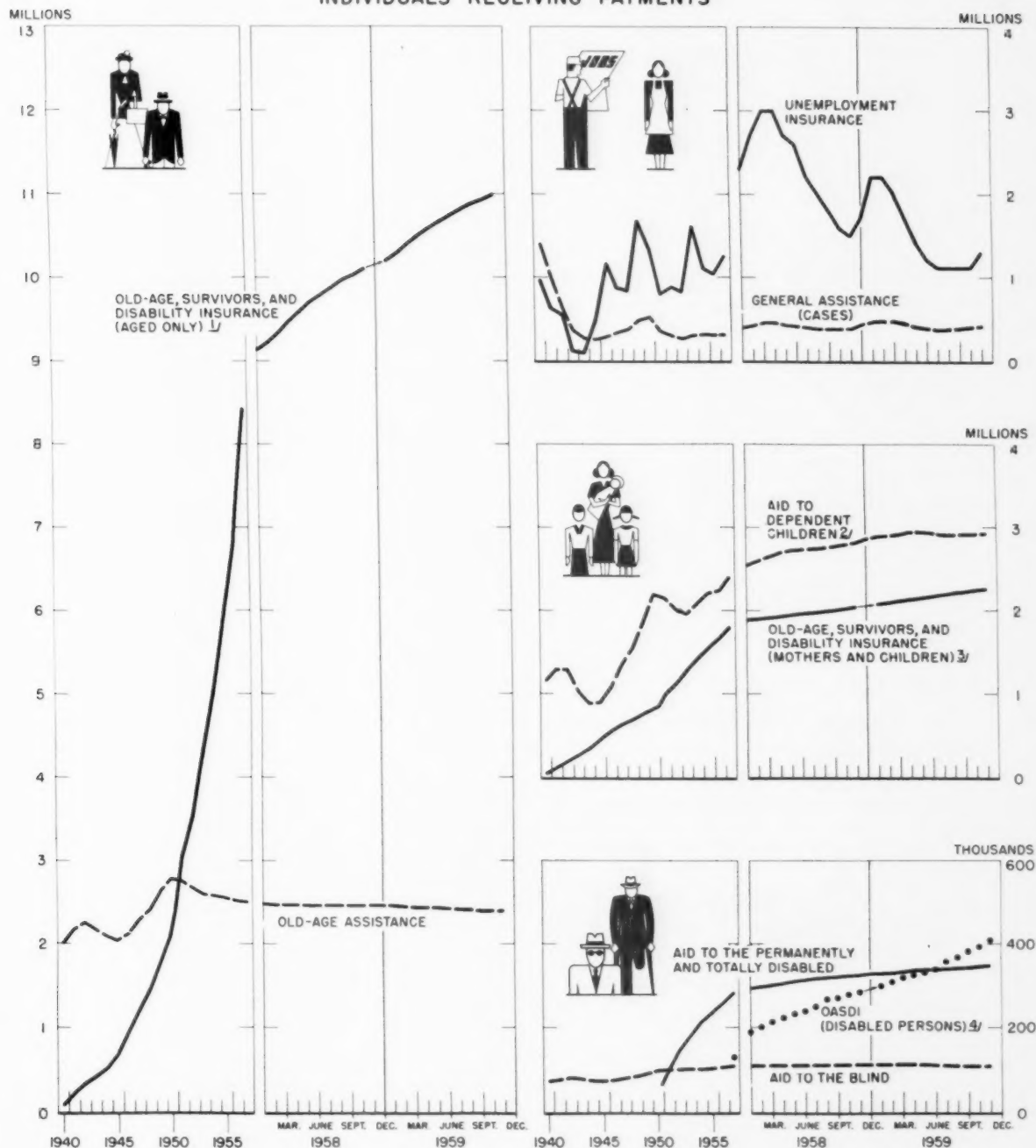
<sup>8</sup> Not computed; data not comparable.

<sup>9</sup> Includes cases receiving medical care only.

<sup>10</sup> Estimated on basis of reports from sample of local jurisdictions.

# Social Security Operations\*

## INDIVIDUALS RECEIVING PAYMENTS



\* Old-age, survivors, and disability insurance: beneficiaries receiving monthly benefits (current-payment status; data for December 1958 not available); annual data represent average monthly number. Public assistance: monthly number of recipients under all State programs; annual data, average monthly number. Unemployment insurance: average weekly number of beneficiaries for the month under all State laws (and under Federal workers' program); annual data, average weekly number for the year.

NOTE: Data for payments and data for individuals receiving payments appear in alternate months.

<sup>1</sup> Receiving old-age, wife's or husband's, widow's or widower's, or parent's benefit.

<sup>2</sup> Children plus 1 adult per family when adults are included in assistance group; before October 1950 partly estimated.

<sup>3</sup> Receiving mother's benefit, wife's benefit payable to young wives with child beneficiaries in their care, or child's benefit payable to children under age 18.

<sup>4</sup> Disabled workers aged 50-64 or disabled dependent children aged 18 or over of retired, disabled, or deceased workers.

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